


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90074 031 ***150.00

DOCUMENT # P04000047694	
1. Entity Name ROD SERVICES, INC.	

Principal Place of Business 1505 MEADOWRIDGE DRIVE VALRICO, FL 33594	Mailing Address 1505 MEADOWRIDGE DRIVE VALRICO, FL 33594
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40004000



2. Principal Place of Business - No P.O. Box # 3615 ALAFIA CREEK ST.	3. Mailing Address 3615 ALAFIA CREEK ST.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

02032007 Chg-P CR2E034 (12/06)

City & State PLANT CITY, FLORIDA	City & State PLANT CITY, FL.
Zip 33567	Country U.S.A.
City & State PLANT CITY, FL.	City & State PLANT CITY, FL.
Zip 33567	Country U.S.A.

4. FEI Number 20-0895685	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent	
DOROSLOVAC, RODNEY 1505 MEADOWRIDGE DRIVE VALRICO, FL 33594	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable) 3615 ALAFIA CREEK ST.	
City PLANT CITY	FL Zip Code 33567

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE MDC	DATE 2/3/07

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete DOROSLOVAC, RODNEY 1505 MEADOWRIDGE DRIVE VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3615 ALAFIA CREEK ST. PLANT CITY, FL. 33567
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
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SIGNATURE: MDC	DATE 2/3/07	DAYTIME PHONE # (813) 924-1319
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