

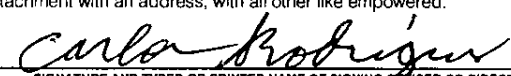


FILED
Apr 16, 2008 08:00 A]
Secretary of State

DOCUMENT # P04000102067 1. Entity Name C. RODRIGUEZ INVESTMENTS, INC.							
Principal Place of Business 3175 W. 78TH PLACE HIALEAH, FL 33018		Mailing Address 3175 W. 78TH PLACE HIALEAH, FL 33018					
<div style="text-align: center;">DO NOT WRITE IN THIS SPACE</div>							
		<div style="text-align: center;"></div> <div>04102008 No Chg-P CR2E034 (11/05)</div> <table border="1"><tr><td>4. FEI Number 05-0605465</td><td>Applied For Not Applicable</td></tr><tr><td colspan="2">5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required</td></tr></table>		4. FEI Number 05-0605465	Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required							
6. Name and Address of Current Registered Agent RODRIGUEZ, CARLOS 3175 W. 78TH PLACE HIALEAH, FL 33018		<div style="text-align: center;">DO NOT WRITE IN THIS SPACE</div>					
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>							
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS		<div style="text-align: right;">000000901146 04/29/08-80058-009 150.00</div>					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RODRIGUEZ, CARLOS 3175 W. 78TH PLACE HIALEAH, FL 33018						
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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.							
SIGNATURE: 		<div style="text-align: right;">4/10/08 Date Daytime Phone #</div>					