2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 02, 2008 8:00 am Secretary of State

DOCUMENT # P06000025961 1. Entity Name ROBERT RODRIGUEZ, INC.					05-02-2008 90174 015 ***150.00			
3497 MARIO	I TS NC	ailing Address PO BOX 245 POLFO SPRINGS, FL 33890	· .	- Good		ili Gelta kana bara ambi mbri	BBI et l et t	
	OO NOT WRITE II	N THIS SPA	CE	032020 4. FEI N. 20-4	08 No Chg-P) 	lied For Applicable	
	6. Name and Address of Current Regis	tered Azient	<u> </u>	3. Coma		Fee Required		
RODRIGUEZ, ROBERT 3497 MARION ST ZOLFO SPRINGS, FL 33890			DO NOT WRITE IN THIS SPACE					
8. The above the obliga SIGNATURE.	named entity submits this statement for the ptions of registered agent. Signeture typed or printed name of registered agent and title			istered agent, or		orida. I am familiar with, a	nd accept	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution,	ncing	\$5.00 May Be Added to Fees		·		
10.	OFFICERS AND DIREC	CTORS						
TITLE NAME STREET ADDRESS CIFY-ST-ZIP	P RODRIGUEZ, ROBERT 3497 MARION ST ZOLFO SPRINGS, FL 33890							
TITLE NAME STREET ADDRESS CITY-S1-ZIP	VP RODRIGUEZ, MARIA M 3497 MARION ST ZOLFO SPRINGS, FL 33890			•	.			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			-2 (5.2.15	- D(NOT W	'RITE"		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN.	THIS SF	PACE -	-	
TITLE NAME STREET ADDRESS CITY-51-ZIP					3			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			t					
OI BIO CO	certify that the information supplied with this fi on this report or supplemental report is true a poration or the receiver or trustee empowered or or an attachment with an address, with all	a io evecole illig leboti es ledoi:	mptions contai ure shall have to ed by Chapter	ned in Chapter he same legal e 607, Florida Stal	119, Florida Statutes. I flect as if made under dutes; and that my name	appears in Biock 10 or 81	rmation director lock 11 if	