## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000089454

1. Entity Name

RODDENI DESIGN GROUP, P.A.



FILED
May 06, 2008 08:00 AN
Secretary of State

Principal Place of Business

7304 SW 128TH COURT MIAMI, FL 33183

Mailing Address

7304 SW 128TH COURT MIAMI, FL 33183



## DO NOT WRITE IN THIS SPACE

04302008 No Chg-P CR2E034 (11/05)

4. FEI Number
20-5186723 Applied For
Not Applicable

5. Certificate of Status Desired Sa.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, DENISE 7304 SW 128TH COURT MIAMI, FL 33183

## DO NOT WRITE IN THIS SPACE

8. The above named ent the obligations of regions		purpose of changing its regist	tered office or registered agent,	or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered			tered Agent signature réquired when reinstat	ing) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing  Trust Fund Contribution.  \$5.00 May Be Added to Fees		) U00000949406		
10.	OFFICERS AND DIRE	CTORS		06/03/08-80028-005 150.00		
STREET ADDRESS 7304 SW	UEZ, DENISE / 128TH COURT L 33183					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. I hereby certify that the information cynolical with this filling does not qualify for the eventsined in Chanter 110. Florida Statutos I further partity that the information						

Indicated on this report or supplied with this riling does not quality 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE OR DIREC

4/30/08

205-283-9022

Daytime Phone #