FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

Change

1/20/97

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300004779 (3)

RUDY'S HOME IMPROVEMENT CORPORATION

11899 S.W. 5TH STREET 12040 SW 181 ST MIAMI FL 33184 MIAMI FL 33177 3. Date Incorporated or Qualified 3a. Date of Last Report 01/21/1993 07/24/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0391943 Not Applicable 26 21 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Country Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032. Yes No 29 Florida Statutes 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RODRIGUEZ, RODOLFO JR 11899 S.W. 5TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33184 83 64 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Rug stered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition DELLTE Change TITLE 1.1 TITUE NAME RODRIGUEZ, RODOLFO JR 1.2 NAME 11899 S.W. 5 ST. 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33184** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETË Change Addition 2.1 TITLE TITLE GALAN, MANUEL P 2.2 NAME 18927 NW 63 CIRCUS LN STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 2.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 3.1 TITLE TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP Addition DELETE Change 4.1 TITLE TITLE NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE. Change Addition 5.1 TITLE TITLE

5.2 NAME

61 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6 4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

5.4 CITY-ST-ZIP