## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Sep 15 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9300006686 (8)

RUDOLPH RODER CONSTRUCTION, INC.

Principal Place of Business Mailing Address										<b>                                    </b>	ACCIO BILLE	10110 0111 1801		
2608 NE 35 DR PO BOX 39255														
FT LAUDERDALE FL 33308				FT LAUDERDALE FL 33339 US						DO NOT WRITE IN THIS SPACE				
00			,	<b>J</b> 0					3.	Date Incorporated or Qualified		le of Last	Report	
									-	01/26/1993	ł		•	
2. Principal	Place of Bus	inoss	28	2a, Mailing Address					4.	01/26/1993 07/15/1996 4. FEI Number Applied For				
21				26						65-0383398 Not Applicable				
Suite, Apt. #, etc.				Suite, Apt. #, etc.					SR 75 Additional					
22				27					5.	Certificate of Status Desired			Required	
City & State				City & State				6.	Election Campaign Financing		\$5.0	O May Be		
23			28	28					Trust Fund Contribution Added to Fees					
Zip	Country			Zip Cou			ountry		B.	This corporation owes or has pai	d the curr	ent year f	Intangible	
24		29							Personal Property Tax due June 30. Yes No					
		e and Address of	Current Regi	stered Age	nt		r		10.	Name and Address of New Re	alstered A	gent		
	)der, Rud						81	Name						
2608 NE 35 DR							82	Street Addr	et Address (P.O. Box Number is Not Acceptable)					
FT	. LAUDERD	ALE FL 33308						on our read			,0,			
							В3							
							84	City				leel 2	- Cada	
								,			FL	1 1 '	p Code	
11. Pursuani	t to the provi	sions of Sections	607.0502 and	007.1508, FI	lorida Statut	es, the al	ονο	named corp	oratio	in submits this statement for the p	urpose of	changing	its registered	
oπice or agent. I	registered a am f <b>a</b> miliar v	gent, or both, in ti vith, and accept th	ne State of Flor ne obligations (	ida. Such ct of, Section 6	nange was i i07.0505. Fli	authorized orida Stat	d by utes	the corporat	tion's t	poard of directors. I hereby accep	t the appo	iintment a	is registered	
SIGNATURE		•	J	,										
OIGHT TOTAL	Signature, type	d or printed harne of reg	istered agent and hi	e if applicable	(NOI	E Registered	Age	nt signature requir	red when	reinstating)	DATE			
12.	- BBB****	Of FICE	RS AND DIRE	F F 1 11 5 3 3 5 3 5 5 5		13.				ADDITIONS/CHANGES TO OFFIC				
TITLE	DPST	51156151		L_	DELFTE	1.1 10	LF					☐ Change	B Addition	
NAME		RUDOLPH				1.2 NA	ME							
STREET ADDRESS		E 35 DR				1.3 ST	RFET.	ADDRESS						
CITY-ST-ZIP	FILAU	DERDALE FL				1.4 00	1Y - \$1	1 - 71P						
TITLE					DELETE	2.1 10	LE					Change	Addition	
NAME						2.2 NA	ME							
STREET ADDRESS	}					2 3 ST	REET	ADDRESS						
CITY-ST-ZIP	ļ					2.4 CI	1Y- S	T-ZIP						
TITLE				Ш	DELETE	3.1 TIT	ιE					Change	Addition	
NAME						3.2 NA	ME							
STREET ADDRESS						3.3 ST	REET	ADDRESS						
CITY-ST-ZIP		_ <del>_</del>			,	3.4 CI	1Y-S	T- <b>Z</b> (P						
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NAME						4 2 N	<b>AME</b>							
STREET ADDRESS						4 3 ST	AEET /	ADDRESS					ļ	
CITY-ST-ZIP						4 4 CI	Y-\$1	1 - ZIP						
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NAME						5 2 NA	ME							
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CITY-ST-ZIP						5 4 0/1	Y-SI	I - ZIP						
TITLE					DELFTE	6.1 111	Lŧ					Change	Addition	
NAME						6.2 NA	ΜĚ							
STREET ADDRESS						6.3 ST	REE1 /	ADDRESS						

6.4 City - St - ZiP 14. I do hereby certify that the information supplied with this filling 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.