Applied For

\$8.75 Additional

Not Applicable

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

2a. Mailing Address

Suite, Apt. #, etc.

PROFIT CORPORATION ANNUAL REPORT

2. Principal Place of Business

Suite, Apt. #, etc.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000029087 (2)

RODRIGUEZ INVESTMENTS, INC.

Principal Place of Business Malling Address 193 SW 102 CT 193 SW 102 CT MIAMI FL 33174 MIAMI FL 33174

98 JUL 27 AM 9: 03

SECRETARY OF STATE TALLAHASSEE, FLORIDA

3. Date Incorporated or Qualified

5. Certificate of Status Desired

04/19/1993 4. FEI Number

65-0409248

2/14/90



DO NOT WRITE IN THIS SPACE

22	<u> </u>			27						Fee Re	equired
City & State		City & State							6. Election Campaign Financing	\$5.00	May Be
23		_		28	28				Trust Fund Contribution	Added to Fees	
Zip			Country	Zip	Zip Cou				8. This corporation owes or has paid the co	ırrent year inte	angible
24	3	25		29		30			Personal Property Tax due June 30.	Yes	No
			d Address of Curre	nt Registered	Agent				10. Name and Address of New Registere	d Ag ent	
ros, marka v						81	81 Name			ā ē	
376 0) SW 🕽	B2 AVE					82 Street A		ss (P.O. Box Number is Not Acceptable)		
MAN	ul FL	\$ 3155						Oliobi Addibi	as (F.O. DOX Holliber is Hot Acceptable)	5	
	7					83	3			E 4:	
	7							0"		<u> </u>	
	Ŷ					84	•	City	F	85 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											gistered
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: Registered Agent signature required when reinstating) DATE Total Control of the control o											
12.	- 1			ND DIRECTOR		13.	Ť		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	PRS IN 12
TITLE	D				DELETE	1.1 TITLE				Change	Addition
NAME	ROO	ro ģr iguez, alberto l			—	1,2 NAME					
STREET ADDRESS		SW 102				1.3 STREET	TAD	DORESS		en al	
CITY-ST-ZIP	MAÑ	MI FL 33174				1.4 CITY-S1	1.4 CITY-ST-ZIP			4	
TITLE	D	DELETE					2.1 TITLE		و والتناق	Chilonel	TOTAL TOTAL
NAME	ROD	RIGUEZ	, RAQUEL		La pecere	2.2 NAME			10000260: -07/31/98- ****150.0		.012
STREET ADDRESS		18W 102 CT				2.3 STREET		DORESS	-07/31/36-	- M 1021	1013
CITY-ST-ZIP		Mi FL 33174					2.4 CITY-ST-ZIP		****120.0	<u>ያ</u>	130.00
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STREET ADDRESS		ISW 102 CT IAN FL 33174						DRESS		1 5	
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NAME .	<u> </u>					4.2 NAME				Cilaige	Addition
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CITY-STIZIP	4					4.4 CITY-ST		. !		7	
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STREET ADDRESS	*					5.3 STREET		DRESS		É	
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14. hereby ce	etify the	t the info	ormation supplied with	h this filing doe	s not qualify for the	6.4 CITY-S1 exemption	n ei	tated in section	on 119.07(3)(i). Florida Statutes I further certific	that the inform	mation
14. I 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.											

JULY 14, 1998

FLORIDA DEPARTMENT OF STATE SANDRA B. MORTHAM SECRETARY OF STATE DIVISION OF CORPORATIONS

REF: DOCUMENT NO. P93000029087 RODRIGUEZ INVESTMENTS, INC.

MRS. MORTHAM:

IN REFERENCE TO THE 1998 ANNUAL REPORT WE ARE REQUESTING A WAIVER OF THE PENALTY FOR LATE FILING. THERE WAS A MISTAKE DONE BY MY SECRETARY. WE HAVE THREE CORPORATIONS. THEY WERE PAID ON TIME BUT ONE OF THE CORPORATIONS WAS PAID DOUBLE IN ERROR, INSTEAD OF PAYING RODRIGUEZ INVESTMENTS, INC. WE WERE NOTIFIED BY YOUR DEPARTMENT OF THE DUPLICATION AND WE FILED A FORM FOR REFUND FOLLOWING THE INSTRUCTIONS.

THE THREE CORPORATIONS ARE: ALBERTO RODRIGUEZ M.D., P.A. - ALBERTO L. RODRIGUEZ, INC. - RODRIGUEZ INVESTMENTS, INC.

WE ARE ENCLOSING PHOTOCOPIES OF DOCUMENTS FROM YOUR DEPARTMENT PROVING THE DUPLICATION OF PAYMENT. WOULD YOU PLEASE ACCEPT THE CHECK ENCLOSED AS A PAYMENT FOR RODRIGUEZ INVESTMENTS, INC. WITHOUT THE LATE CHARGE.

WE REALLY APPRECIATE YOUR COOPERATION IN THIS MATTER.

SINCERELY,

ALBERTO RODRIGUEZ, M.D.