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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

**FILED** 

May 14 1997 8:00am

Secretary of State

- I LECTION & CONTINUE STATE CONTINUE CO

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000031545 (5)

RODOVIAS INTERNATIONAL, INC.

I do hereby certify that the information si information indicated on this annual report I am an officer or director of the compora

					<b>                                    </b>
Principal Place of Business Mailing Address			L 180 (280) 310 (910) 11111 CONT. BOTA	I MUIDO 11901 LIDOL OLINI DIOSI 9111 IDDI	
11740 N.W. 2 DRIVE 11740 N.W. 2 DRIVE CORAL SPRINGS FL 33071 5019			ini a		
COTOL SPRING	35 FL 930/1	CORAL SPRINGS PL 330/15	JO19		
				<ol> <li>Date Incorporated or Qualified 04/30/1993</li> </ol>	3a. Date of East Report 05/06/1996
2. Principal Place of Business		2a. Mailing Address			Applied For
21		26 5721 Rive			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27 / 0 (	27 106		S8.75 Additional Fee Required
City & State			28 Coral Springs FC		\$5.00 May Be Added to Fees
Zip	Country	29 33067	Country	8. This corporation has liability for	_ * 1
24	25	[]	10 US 12 _		Yes No
9, Name and Address of Current Registered Agent  10, Name and Address of New Registered Agent  RETANCOLIST CARLOS  81 Name					
44740 NIM A PORT				arlos Betaucosi	<u> </u>
11740 N.W. 2 DRIVE CORAL SPRINGS FL 33071			82 Street Ad	ddress (P.O. Box Number is Not Acceptate 2 / Riversida Driva	ole)
l CON	MC OFFINGS FL 33071		83	KI KIVELSTON OITIE	
			A	pl. 106	
17.13	. ~ ^ /		84 City Cov	n C. S.	FL 85 Zip Code 338647
11. Pursuant to the provisions of Soctions 6/7.0502 and 607.1508. Florida Statutes, the above-name office or registered agent, or book, in thy State of Florida. Such change was authorized by the co				orporation submits his statement for the p	purpose of changing its registered
office or r	egistered agent, or/both, in t	the State of Florida, Such change was au the obligations of Section 607 0505. Flori	ithorized by the corpo ida Statutes	ration's board of directors. I hereby accep	of the appointment as registered
agent. I am tamitiar with and except tyle obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  4/29/93					
SIGNATURE	Signature, lyped or print dinable of o	islance agent and title if applicable (NOTE:	Registered Agent signature re	quired when roinstating)	DATE
12.		ERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PD	☐ DELETE	1.1 TOTLE	PB Control P	Change Addition
NAME	BETANCOURT, CARLO	8	1	Carlos Betacourt.	h. t. 464
STREET ADDRESS	11740 N.W. 2 DRIVE CORAL SPRINGS FL 33	9074	13 STREET ADDRESS	5721 Riverside Driv	2 Apri-706
CITY-ST-ZIP TITLE	CONAL OFFINGS FL S	DELETE	1.4 CITY-S1-ZIP	Corul spring F1	33067 ☐ Change ☐ Addition
NAME			2 1 TITLE 2 2 NAME	ŭ	C change C Noutron
STREET ADDRESS			2.3 STREET ADDRESS		
CHTY-ST-ZIP			2. 4 Crty-St-ZIP		•
TITLE		☐ DELL1F	3.1 THILE		Change Addition
NAME			3.2 NAME		·
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY+ST-ZIP		
TITLE		DETETE	4.1 TILLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - \$1 - 7IP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-7IP		
TITLE		DELETE	611HLE		Change D Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

in this Ning does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the lemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that repervel or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

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