

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P93000057235 (2)**

1. Corporation Name

**L.C. RODRIGO ABOGADOS, P.A.**



Principal Place of Business

**2100 CORAL WAY  
SUITE 501  
MIAMI FL 33145**

Mailing Address

**2100 CORAL WAY  
SUITE 501  
MIAMI FL 33145**

2. Principal Place of Business

**21 3950 Hardie Road**  
Suite, Apt. #, etc.

**22**  
City & State

**23 Coconut Grove, FL**

Zip

**24 33133**

Country

**25 Dade**

2a. Mailing Address

**26 3950 Hardie Road**  
Suite, Apt. #, etc.

**27**  
City & State

**28 Coconut Grove, FL**

Zip

**29 33133**

Country

**30 Dade**

3. Date Incorporated or Qualified

**08/16/1993**

3a. Date of Last Report

**02/21/1995**

4. FEI Number

**65-0439888**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**AMKGS REGISTERED AGENTS INC  
ONE SOUTHEAST THIRD AVE.  
SUITE 1980  
MIAMI FL 33131**

10. Name and Address of New Registered Agent

**81** Name

**82** Street Address (P.O. Box Number is Not Acceptable)

**83**

**84** City

**FL**

**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 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 (if applicable) (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

**TITLE** **D** ☐ DELETE  
**NAME** **RODRIGO, LUIS C**  
**STREET ADDRESS** **2100 CORAL WAY SUITE 501**  
**CITY - ST - ZIP** **MIAMI 33 33145**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

**TITLE** ☐ DELETE  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**1.1 TITLE** **D** ☒ Change ☐ Addition  
**1.2 NAME** **Rodrigo, Luis C**  
**1.3 STREET ADDRESS** **3950 Hardie Road**  
**1.4 CITY - ST - ZIP** **Coconut Grove, FL 33133**

**2.1 TITLE** ☐ Change ☐ Addition  
**2.2 NAME**  
**2.3 STREET ADDRESS**  
**2.4 CITY - ST - ZIP**

**3.1 TITLE** ☐ Change ☐ Addition  
**3.2 NAME**  
**3.3 STREET ADDRESS**  
**3.4 CITY - ST - ZIP**

**4.1 TITLE** ☐ Change ☐ Addition  
**4.2 NAME**  
**4.3 STREET ADDRESS**  
**4.4 CITY - ST - ZIP**

**5.1 TITLE** ☐ Change ☐ Addition  
**5.2 NAME**  
**5.3 STREET ADDRESS**  
**5.4 CITY - ST - ZIP**

**6.1 TITLE** ☐ Change ☐ Addition  
**6.2 NAME**  
**6.3 STREET ADDRESS**  
**6.4 CITY - ST - ZIP**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**Luis Carlos Rodrigo**

**4/26/96**

Daytime Phone #

**(305) 669-8701**

CR2E034 (12/95)