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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

P93000081135

DOCUMENT #

1. Corporation Name

ZOE E. RODRIGUEZ, P.A.

FILED 99 NOV 29 PM 10: 31

SECRETARY OF STATE TALLAHASSEE. FLORIDA

ZUE	E. KUDKIGUEZ, F.	n. •				i	
Principal Place		Mailing Add					
	SW 27th Avenue	Ste 206 <sub>5</sub>	SAME			DO NOT WRITE IN TH	HS SPACE
Miami	F1. 33135					3. Date Incorporated or Qualifed	NO GI AGE
						11-24-93	
2. Dringing D	lace of Business	2a. Mailing	Addrass			4. FEI Number	Applied For
	lace of positiess	26	71001035				Not Applicable
Suite, Apt	# etc		nt # etc			65-0455846	\$8.75 Additional
22	w, 616.	tc. Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Required	
City & Stat	e	City & S	State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip		Country	'	8. This corporation owes the current year	
24	25	29	30	ــــــــــــــــــــــــــــــــــــــ		Personal Property Tax.  19. Name and Address of New Register	Yes No
	9. Name and Address of Currer	t Registered Ag	ent	81	Name	10. Name and Address of New Register	to videur
	E. RODRIGUEZ			*'	Name		
1250 SW 27th AVE. #206 MIAMI, FLORIDA 33135			82 Street Address (P.O. Box Number is Not Acceptable)				
MIAF	II, FLORIDA 33133			83			
				84	City		85 Zip Code
						F	<del></del> ,1 ,,1,
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations.	of Florida, Such	change was suth	orized by	the corpor	orporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its registered pointment as registered
SIGNATURE				-1-1		wined when reinstelled) DATE	***
					n signature req	juired when reinstating) DATE	
40	Signature, typed or printed name of registered age		(10.12.10			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
12.		ID DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12  Change Addition
TITLE			DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	
	OFFICERS AN			13. 1.1 TITLE 1.2 NAME	T ADDRESS	ADDITIONS/CHANGES TO OFFICERS	

1.4 CITY-ST-ZIP CITY-ST-ZIP 9000030656°°°9\_0^ DELETE Addition TITLE 2.1 TITLE RODRIGUEZ, ZOE E. D 22 NAME NAME 1250 SW 27th Avenue Ste 206 2.3 STREET ADDRESS \*\*\*\*150.00 \*\*\*\*150.00 STREET ADDRESS F1 . 33135 2.4 CITY-ST-ZIP Miami, CITY-ST-ZIP Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE TITLE 4.1 TITLE 4.2 NAME 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 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 infoatindicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver of 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 attachprient with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED HAME OF SUNING OFFICER OR DIRECTOR

11/22/99 (3W) 649-223/
Deta Deyfrine Phone #

Zoe E. Rodriguez, P.A. 1250 SW 27<sup>th</sup> Avenue #206 Miami, Fl. 33135

October 8, 1999

DEPARTMENT OF STATE Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314

Re: Zoe E. Rodriguez, P.A. P93000081135

Dear Sir/Madam

I received notification that the above corporation was administrative dissolved for not filing the annual report for 1999.— I don't recall receiving the package and presumably lost in the mail.— Due to this fact, I would like to ask you to please abate the penalty and reinstate the corporation to active status.— A check for \$150.00 is enclosed to cover the filing fee.

Your attention to this matter will be very much appreciated.

Sincerely.

Zoe E. Rodriguez P. A.

President.