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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000082739

1. Corporation Name

WILLIAM G. RODEN, JR., INC.

FILED Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90072 034 ***150.00



								11111	O COLCER FRANCISMO	
Principal Place of Business Mailing Address							·			
10263 HUNT CLUB LANE 10263 HUNT CLUB LANE										
PALM BEACH GARDENS FL 33418		PALM B	PALM BEACH GARDENS FL 33418				TO MOTIVE IN THE COLOR			
							DO NOT WRITE IN THIS SPACE	<u></u>		
							3. Date Incorporated or Qualifed 11/23/1993			
2. Principal P	lace of Business	2a. Mai	ling Address				4. FEI Number	Ar	oplied For	
21		26					65-0449472	No	ot Applicable	
Suite, Apt.	#, etc.	Suit	Suite, Apt. #, etc.				5. Certificate of Status Desired			
22		27	27				5. Certificate of Otolog Desired	ee Re	equired	
City & Stat	e	City	City & State				6. Election Campaign Financing	5.00	May Be	
23		28					Trust Fund Contribution A	dded	to Fees	
Zip	Country	Zip		Cou	ntry		8. This corporation owes the current year Intangible	€		
24	25		30			Personal Property Tax. Yes No				
	9. Name and Address of Curr	rent Registere	gistered Agent			10. Name and Address of New Registered Agent				
					81	Name	, <i>*</i>			
LAMONT & NEIMAN P.A.						Street Address (P.O. Box Number is Not Acceptable)				
	BISCAYNE TOWER, SUITE 35				82	Sucer Addit	Street Address (r.O. Dox Hallings to Hot Hotologically			
	OUTH BISCAYNE BOULEVARD				83					
MIAN	AI FL 33131						· loc	7:-	Codo	
					84	City	FL 85	Z1p	Code	
agent. I a	m familiar with, and accept the obli	igations of, Sec	tion 607.0505, Flo	rida Statı	ıtes	nt signature required	on's board of directors. I hereby accept the appointment			
12.	OFFICERS	AND DIRECTO	RS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIF	ECT	ORS IN 12	
TITLE	D		☐ DELETE	11 TF	TLE.			hange	☐ Addition	
NAME	RODEN, WILLIAM G JR			1.2 N/	ME				.	
STREET ADDRESS	10263 HUNT CLUB LANE			1.3 ST	REET	T ADDRESS				
CITY-ST-ZIP	PALM BEACH GARDENS FL	33418		1.4 CI	TY-S	T-ZIP				
TITLE			☐ DELETE	2.1 TI			c	hange	☐ Addition	
NAME				2.2 N/	3M				Į.	
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NAME				3.2 NA	ME				l	
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TITLE			☐ DELETE	6.1 TI				hange	☐ Addition	
NAME				62 N/			_	-	. 1	
OTDEET ADDRESS						T ADDRESS			ļ	

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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: