

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

FILED  
Feb 23, 1999 8:00 am  
Secretary of State

02-23-1999 90038 038 \*\*\*150.00

DOCUMENT # P94000004431

1. Corporation Name

RODRIGUEZ & SONS, INC.

Principal Place of Business

13727 S.W. 12TH ST.  
MIAMI FL 33184

Mailing Address

13727 S.W. 12TH ST.  
MIAMI FL 33184

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/18/1994

4. FEI Number

65-0496819

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes

☒ No

2. Principal Place of Business

21 15415 SW 80 ST.

2a. Mailing Address

26 15415 SW 80 ST.

Suite/Apt. #, etc.

27 106

City & State

23 Miami Fla.

City & State

28 Miami Fla.

Zip

Country

24 33193

25

29 33193

30

9. Name and Address of Current Registered Agent

RODRIGUEZ, OSVALDO  
13727 S.W. 12TH ST.  
MIAMI FL 33184

10. Name and Address of New Registered Agent

81 Name

Oswaldo Rodriguez

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

15415 SW 80 ST. APT. 106

83

84 City

Miami Fla.

FL

85

Zip Code

33193

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 Oswaldo Rodriguez (PD+SD)

Oswaldo Rodriguez

1-4-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME RODRIGUEZ, JULIO H  
STREET ADDRESS 13727 S.W. 12TH ST.  
CITY-ST-ZIP MIAMI FL 33184

TITLE VD ☐ DELETE

NAME RODRIGUEZ, HUMBERTO  
STREET ADDRESS 13727 S.W. 12TH ST.  
CITY-ST-ZIP MIAMI FL 33184

TITLE VD ☐ DELETE

NAME RODRIGUEZ, JULIO  
STREET ADDRESS 13727 S.W. 12TH ST.  
CITY-ST-ZIP MIAMI FL 33184

TITLE SD ☐ DELETE

NAME RODRIGUEZ, OSVALDO  
STREET ADDRESS 13727 S.W. 12TH ST.  
CITY-ST-ZIP MIAMI FL 33184

TITLE TD ☐ DELETE

NAME RODRIGUEZ, CARLOS  
STREET ADDRESS 13727 S.W. 12TH ST.  
CITY-ST-ZIP MIAMI FL 33184

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition

1.2 NAME Rodriguez, Oswaldo  
1.3 STREET ADDRESS 15415 SW 80 ST. APT. 106  
1.4 CITY-ST-ZIP Miami Fla. 33193

2.1 TITLE VO ☒ Change ☐ Addition

2.2 NAME Rodriguez, Julio H - Novo  
2.3 STREET ADDRESS 15415 SW 80 ST. APT 106  
2.4 CITY-ST-ZIP Miami Fla 33193

3.1 TITLE TD ☒ Change ☐ Addition

3.2 NAME Rodriguez, Humberto D  
3.3 STREET ADDRESS 15415 SW 80 ST APT 106  
3.4 CITY-ST-ZIP Miami Fla. 33193

4.1 TITLE SD ☒ Change ☐ Addition

4.2 NAME Rodriguez, Oswaldo  
4.3 STREET ADDRESS 15415 SW 80 ST. APT. 106  
4.4 CITY-ST-ZIP Miami Fla. 33193

5.1 TITLE VO ☒ Change ☐ Addition

5.2 NAME Rodriguez, Olmedo C  
5.3 STREET ADDRESS 15415 SW 80 ST. APT 106  
5.4 CITY-ST-ZIP Miami Fla. 33193

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 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.

SIGNATURE: Oswaldo Rodriguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)