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 # **P94000033770**1. Corporation Name

RODRIGUEZ, WAITE AND ASSOCIATES, INC.

Principal Place of Business								
	1110 CRANE BLVD							

Mailing Address

1110 CRANE BLVD

SUMMERLAND KEY FL 33042

FILED Jan 25, 1999 8:00am **Secretary of State**

01-25-1999 90031 036 ***158.75



SUMMENEARIND	NET FL 33042	COMMENDATE THE SOUTE			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					05/04/1994			
2. Principal Pl	lace of Business	2a. Mailing Address		-	4. FEI Number		A	oplied For
21		26			65-0489205		N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				. 🔽	\$8.75	Additional
22	•	27			5. Certifcate of Status Desired	. 🗷	. Fee R	equired
City & State	0	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Country	<i>i</i>	8. This corporation owes the curr	rent year Inta	ingible	_/
24	25	29	30		Personal Property Tax.		Yes	☑ No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New I	Registered A	Agent	
	* • • • •	7 / / · · · · · · · · · · · · · · · · ·	81	Name				
	TE, BRUCE DR		82	Street Add	dress (P.O. Box Number is Not Accept	able)		
	CRANE BLVD	f (02	Sileer Auc	areas (1.0. Box Humber is Hot / toops			
SUM	Merland Key FL 33042		83					
				-		· · · · · · · · · · · · · · · · · · ·	logi 7:	Codo
			84	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statutes	s, the abov	e-named cor	poration submits this statement for the	purpose of o	changing its	registered
office or n	egistered agent, or both, in the State of m familiar with, and accept the obligation	r Florida. Such change was au ons of, Section 607.0505, Flori	tnonzeo by da Statutes	tne corporat S.	tion's board of directors. Thereby acce	pr use appoin	itilient da re	gistored
•	in laining, was, and accept the angular							
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: F	Registered Age	nt signature requir	red when reinstating)	DATE		
¥2.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AN		
TITLE	VD	☐ DELETE	1.1 TITLE		•		☐ Change	Addition
NAME	WAITE, GWEN A		1.2 NAME					
STREET ADDRESS	1110 CRANE BLVD		1.3 STREE	TADDRESS				
CITY-ST-ZIP	SUMMERLAND KEY FL 33042	4	1.4 CITY-5	ST-ZIP			_	
TITLE	PD	☐ DELETE	2.1 TITLE		 -		Change	Addition
NAME	WAITE, BRUCE DR.		2.2 NAME					
STREET ADDRESS	1110 CRANE BLVD		2.3 STREE	T ADDRESS				
CITY-ST-ZfP	SUMMERLAND KEY FL 33042		2. 4 CITY-	ST-ZIP				
TITLE	COMMENDATO REF TE GOOTE	DELETE 3.1					Change	☐ Addition
NAME			3.2 NAME					
STREET ADDRESS			4	TADORESS				
	Toblica .		3.4. CITY-	1				
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	01-Zh			Change	Addition
			4, 2 NAME					
NAME STORET ADODESS			1	T ADDRESS	*		•	
STREET ADORESS	²	•	4.4 CITY-5					
CITY-ST-ZIP		□ DELETE	5.1 TITLE	31-LIF			Change	☐ Addition
TITLE		DECETE	5.2 NAME					
NAME				T ADDRESS				
STREET ADDRESS					·			
CITY-ST-ZIP			6.4 CITY-S	51-ZIP		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
TITLE		☐ DELETE		;				- Hoomon
NAME		•	6.2 NAME	1	•.		. ,	* ir
STREET ADDRESS			6.3 STREE	T ADDRESS				

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