PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

1999

DIVISION OF CORPORATIONS

FILED Feb 19, 1999 8:00 am Secretary of State

02-19-1999 90102 029 ***150.00

DOCUMENT # **P94000086763** 1. Corporation Name BLAS RODRIGUEZ Y ASOCIADOS, INC. Mailing Address Principal Place of Business 1208 MULBERRY PLACE 1862 S CLUB DRIVE W PALM BCH FL 33414 WEST PALM BEACH FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/28/1994 Mailing Address 4. FEI Number Applied For 2. Principal Place of Business 2a. Not Applicable 65-0569833 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country This corporation owes the current year Intangible Zip □No Personal Property Tax. 24 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RODRIGUEZ, BLAS M Street Address (P.O. Box Number is Not Acceptable) 82 1862 S CLUB DRIVE WEST PALM BEACH FL 33414 83 Zip Code City 85 84 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 title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13 ☐ Addition (Change ☐ DELETE 1.1 TITLE TITLE RODRIGUEZ, BLAS M 1.2 NAME NAME 1862 S CLUB DRIVE STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 33414 1.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ DELETE TIΠΕ 2.1 TITLE RODRIGUEZ, ROBERT B 2.2 NAME NAME 1208 MULBERRY PL 2.3 STREET ADDRESS STREET ADDRESS W PALM BCH FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETÉ 3.1 TITLE TITLE RODRIGUEZ, MARIO A NAME 3.2 NAME 1071 SE SPINNAKER AVE 3.3 STREET ADDRESS STREET ADDRESS PT ST LUCIE FL 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE 4.1 TITLE TITLE RODRIGUEZ, MICHAEL A 4. 2 NAME NAME 1208 MULBERRY PL 4.3 STREET ADDRESS STREET ADDRESS W PALM BCH FL 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIF CITY-ST-ZIP 6.1 TITLE Change ☐ Addition ☐ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS

64 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.

STREET ADDRESS

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT B. RODRIGUEZ