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Apr 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000043564 (0)**

1. Corporation Name
PRIDEROCK, INC.

Principal Place of Business	Mailing Address
~~7215 MIAMI LAKES DR.~~ 6187 W. 16 AV. ~~SUITE A18~~ ~~MIAMI LAKES FL 33014~~ HIALEAH, FL 33012	~~7215 MIAMI LAKES DR.~~ 6187 W. 16 AVE ~~SUITE A18~~ ~~MIAMI LAKES FL 33014-6939~~ HIALEAH, FL. 33012

3. Date Incorporated or Qualified	3a. Date of Last Report
06/06/1995	04/30/1996

2. Principal Place of Business	2a. Mailing Address
21 6187 W. 16 AV.	26 6187 W. 16 AV
Suite, Apt. #, etc. 22 HIALEAH, FL	Suite, Apt. #, etc. 27
City & State 23 HIALEAH, FL.	City & State 28 HIALEAH, FL.
Zip 24 33012 Country 25 U.S.A	Zip 29 33012 Country 30 U.S.A

4. FEI Number: 65-0592310 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
GUASCH, RAUL ~~7215 MIAMI LAKES DR.~~ 6187 W. 16 AVE ~~SUITE A18~~ ~~MIAMI LAKES FL 33014~~ HIALEAH, FL 33012	81 Name: GUASCH, RAUL 82 Street Address (P.O. Box Number is Not Acceptable): 6187 W. 16 AV 83 84 City: HIALEAH FL 85 Zip Code: 33012

11. Pursuant to the provisions of Section 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: X Raul P. Guasch 4/9/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	VP ☐ Change ☑ Addition
NAME	GUASCH, RAUL	1.2 NAME	CARLOS M. SEA
STREET ADDRESS	~~7215 MIAMI LAKES DR., #A18~~ 6187 W. 16 AV	1.3 STREET ADDRESS	6187 W. 16 AV
CITY-ST-ZIP	~~MIAMI LAKES FL 33014~~ HIALEAH, FL 33012	1.4 CITY-ST-ZIP	HIALEAH, FL. 33012
TITLE	☐ DELETE	2.1 TITLE	V.P. ☐ Change ☑ Addition
NAME		2.2 NAME	EMELINA A. GUASCH
STREET ADDRESS		2.3 STREET ADDRESS	6187 W. 16 AV.
CITY-ST-ZIP		2.4 CITY-ST-ZIP	HIALEAH, FL. 33012
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (9/96)

14. I do 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.

SIGNATURE: X [illegible] 4/9/97 (305) 821-2034