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

PROFIT CORPORATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000015199 (8)

ROLUDEK CORP.

Principal Place of Business Mailing Address

FILED Apr 30 1998 8:00am Secretary of State



120T) P64-P284

MIAMI FL 33125	MIAMI FL 33125		DO NOT WOITE IN THE	2 PDACE
			DO NOT WRITE IN THIS 3. Date Incorporated or Qualified) OF ACE
			02/19/1996	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 7545 E. Tarascic D.L.	26		65-0648026	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	***************************************		\$8.75 Additional
	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		8. Election Campaign Financing	\$5.00 May Be
23 N. Buy VILLAGE 17. 2	28		Trust Fund Contribution	Added to Fees
Zip Country M. (4 m) 24 3 74 25 740 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Z(p	Country	8. This corporation owes or has paid the cr	
24 3.791 25 2000 2		30	·	Yes No
	gistered Agent	81 Name	10. Name and Address of New Registered	I Agent
LUQUE, DOUGLAS		Name		
3231 NW 18 TERRACE		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
MIAMI FL 33125		83 /3 / 3	E TREGJURE DA	<u></u>
		ATY.	27 8-K	
		84 City	y Vichiuse. Fl	85 Zip Code
11, Pursuant to the provisions of Sections 607.0502 an	d CO7 1509 Florido Stoluto	or the above period conv		
office or registered agent, or both, in the State of E	torida. Such chance was a	uthorized by the corporation	on's board of directors. I hereby accept the ap	pointment as registered
agent. I am familiar with, and accept the obligation	is of, Section 607.05 05, Fl o	rida Statutes.		
SIGNATURE Signature typing or printed name of region rest agent are	TEMPORAL MARKET	: Registered Agent signature require	ed when reinstating) DATE	
12. OFFICERS AND DE		1 13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	DELETE	1.1 THEE		Change Addition
NAME LUQUE, DOUGLAS		1.2 NAME		
STREET ADDRESS 3231 N.W. 18 TERR		1.3 STREET ADDRESS 72	145 E. Thenung On	8-16
CITY-ST-ZIP MIAMI FL.		1.4 CITY - ST - ZIP	Bay Village A	33141
TITLE	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME		2.2 NAME		ĺ
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2 4 CITY-ST-ZIP		
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		Ì
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	☐ DELF1 E	6.1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		
14. Thereby certify that the information supplied with the indicated on this annual report or supplemental and	us filing does not qualify fo nual report is true and acci	r the exemption stated in Surate and that my signature	Section 119.07(3)(i), Florida Statutes. I further of e shall have the same legal effect as if made is	pertify that the information ander oath; that I am an
indicated on this annual report or supplemental and officer or director of the corporation or the receiver Block 12 or Block 13 if changed for on an attachma	or trustee empowered to cent with revealed	exocute this report as requ	ired by Chapter 607, Florida Statutes; and that	my name appears in