


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # P96000016992 1. Entity Name ROD INVESTMENTS & ENTERPRISES CORP.	
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Principal Place of Business 19000 SW 192ND ST MIAMI, FL 33187	Mailing Address 19000 SW 192ND ST MIAMI, FL 33187
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**DO NOT WRITE IN THIS SPACE**



03012004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0649327	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  
  
RODRIGUEZ, ALBERTO  
30545 SW 193RD AVE  
HOMESTEAD, FL 33030

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.


SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	1000000128108 04/26/04-80024-023 150.00
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD RODRIGUEZ, ALBERTO 30545 SW 193RD AVE HOMESTEAD, FL 33030
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RODRIGUEZ, ESTEBAN 16451 N.W. 84 AVENUE MIAMI, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RAMALLO, ANA T 541 SW 125TH AVE MIAMI, FL 33184
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RODRIGUEZ, DANIEL 10621 S.W. 66 TERRACE MIAMI, FL 33173
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with or without like empowered.

SIGNATURE:  **4/26/04 305-253-2700**  
DATE AND DAYTIME PHONE NUMBER OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #