## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENTIOF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000050114 (3)

RODZ X & ASSOCIATES, INC.

Applied For Not Applicable

Added to Fees

APPROVED AND FILED

1997 OCT -9 PN 3: 00.

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address		tre: nasar dirit Balat figal tibil dibi fal	
22948 OXFORD PLACE APT. D	22946 OXFORD PLACE APT. D			
BOCA RATON FL 33433	BOCA RATON FL 33433	DO NOT WRITE IN THIS SPACE		
		3. Date Incorporated or Qualified	3a. Date of Last Report	
		06/12/1996		
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied Fo	
21	26	65-0671565	Not Applica	
Suite, Apt. #, etc.	Surte, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additiona	
22	27	o, commente of outras besiden	Fee Required	
City & State	City & State	6. Election Campaign Financing	\$5.00 May Be	

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24 25 9. Name and Address of Current Registered Agent RODRIGUEZ, YOLANDA P 22946 OXFORD PLACE D **BOCA RATON FL 33433** 

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Zip

iiu y	B. This corporation owes or has paid the current year Intangible						
	Personal Property Tax due June 30. Yes No						
	10. Name and Address of New Registered Agent						
81	Name						
82	Street Address (P.O. Box Number is Not Acceptable)						
83							
84	City 85 Zip Code						

Trust Fund Contribution

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	et applicable (NOT)	Registered Agent signature requ	uired wher reinstating) DATE				
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PSD	DELETE	1.1 THEE		Change Addition			
NAME	RODRIGUEZ, YOLANDA P		1.2 NAME	0000023 <b>1</b> 9 -10/14/970	8 <u>4</u> 01			
STREET ADDRESS	22946 OXFORD PLACE #D		1.3 STREET ADDRESS	-10/14/970				
CITY-ST-ZIP	BOCA RATON FL 33433		1.4 CITY - ST - ZIP	****165.00	****165 <b>.</b> 00			
TITLE	VID	DELETE	2.1 TOLE		☐ Change ☐ Addition			
NAME	RODRIGUEZ, NELSON		2.2 NAME					
STREET ADDRESS	22948 OXFORD PLACE #D		2.3 STREET ADDRESS		İ			
CITY-ST-ZIP	BOCA RATON FL 33433		2. 4 CITY-ST-ZIP					
TITLE		DELETE	3 1 111LE		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			
N/AME			4. 2 NAME					
STREET ADORESS			4.3 STREET ADDRESS					
CITY-ST-ZIP			4.4 CITY-ST-7IP					
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		ا می ا			
TITLE		☐ DELETE	6.1 TITLE		Charge Loddion			
NAME			6.2 NAME		15/11/1 )			
STREET ADDRESS			6.3 STREET ADDRESS		, DC ,,			
CITY-ST-ZIP			6.4 CI1Y-S1-ZIP		٣			

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 arrival report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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 changey, or on an attachment with an address.

561

Arjona, Cabanas & Associates, P.A.

Accounting, Tax Planning & Preparation

LEJEUNE CENTRE
782 N.W. LEJEUNE ROAD
SUITE 637
MIAMI, FLORIDA 33126

Manage

FLORIDA ASSOCIATION OF INDEPENDENT ACCOUNTANTS

NATIONAL SOCIETY OF PUBLIC ACCOUNTANTS

August 14, 1997

TELEPHONE: (305) 442-8955

(305) 447-8378

FAX: (305) 447-8530

Florida Department of State Annual Report Filings Division of Corporations P.O. Box 1500 Tallahassee, Fl. 32302-1500

Re: Rodz X & Associates, Inc. Doc #: P96000050114 (3)

## Gentlemen:

We are the accountants for the above taxpayer and the Company's annual report was forwarded to us for our consideration. Please note that the taxpayer received this annual report subsequent to the filing/due date as the taxpayer's were out of the country conducting business.

Enclosed, please find a check for \$165 to cover this annual report's filing fee and we respectfully request abatement of any applicable penalties due to the circumstances described above.

Sincerely

Joseph F. Cabanas