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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000060475 (6) DOCUMENT #
1. Corporation Name

RODRIGUEZ DESIGN GROUP, INC.

**FILED** Jan 23 1998 8:00am Secretary of State

FORT LAUDERDALE FL 33309	FORT LAUDERDALE FL 33309		DO NOT WRITE IN TH	HIS SPACE	
			3. Date Incorporated or Qualified 07/18/1996		
2. Principal Place of Business	2a. Mailing Address		4. FEi Number	Applied For	
21	26		65-0680270	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country 24 25		ountry	This corporation owes or has paid the Personal Property Tax due June 30.		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
RODRIGUEZ, ENRIQUE L		81 Name		-	
1770 NW 64TH ST. STE 630 FORT LAUDERDALE FL 33309		82 Street Address (P.O. Box Number is Not Acceptable)			
		83			
		84 City	F	85 Zip Code	
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						
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE OFFICERS AND DIRECTORS	Registered Agent signature requirements 13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D DELETE	11 TITLE	Change Addition			
NAME	RODRIGUEZ, ENRIQUE L	1.2 NAME				
STREET ADDRESS	1770 NW 64TH ST. STE 630	1.3 STREET ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 33309	1,4 CITY-ST-ZIP				
TITLE	DELETE	2.1 TITLE	Change Addition			
NAME		2.2 NAME	_ • • _ ·			
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		8.3 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	L] DELETE	6.1 TITLE	Change Addition			
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET ADDRESS				
CITY - ST - ZIP	and the table in Ferrence and a supplied with the STOR of the case of	6.4 CITY - ST - ZIP				

I hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119,07(3)(t), Florida Statutes. I further certify that the informatio 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 frustee ampewered 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 accress.

SIGNATURE:

REQUIRED

1/16/98