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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000001835 (2)

RODNEY ALMEIDA, INC					
				<u> </u>	. 8.818 1 (1 .88 1 (1818) (1.8 8) (1.89) (1. 8 0)
Principal Plac	e of Business	Mailing Address			. EE/8/ 1/90/ 19186 1/10/ 0/11 1904
15906 SOUTHWEST BI TERRACE 15906 SOUTHWEST BI TERRACE MIAMI FL 33193 MIAMI FL 33193			RACE	DO NOT WRITE IN TI	UIC CDACE
				3. Date Incorporated or Qualified	115 SPACE
				01/08/1997	
	lace of Business	2a. Mailing Address	70 ()	4. FEI Number	Applied For
	s.w. 72 St.	26 9350 S.W	1. 16 54.	65-0716106	Not Applicable
Suite Apt.	د 115	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Miar		28 Miami, FL.		Trust Fund Contribution	Added to Fees
Zip 33 1	173 Country	29 33173 3	Country	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
24	9, Name and Address of Current			10. Name and Address of New Register	-
AMERILAWYER CHARTERED 81 Name					
O CO ALBERTA ALPHANE				ess (P.O. Box Number is Not Acceptable)	
CORAL GABLES FL 33134				ess (P.O. Box Number is Not Acceptable)	
			83		
			84 City		85 Zip Code
					EL S 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		Registered Agent signature require 13.	ed when reinstating) DA' ADDITIONS/CHANGES TO OFFICERS	····
TITLE	PSTD	DELETE	1.1 TITLE	7.054.11.01.05.11.17.02.0 1.0 0.11.02.10	Change Addition
NAME	ALMEIDA, RODNEY		1.2 NAME		
STREET ADDRESS	15906 SOUTHWEST 81 TERRA	CE	1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33193		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		DELETE	2. 4 CITY - ST - ZIP		Change Addition
TITLE			3.1 TITLE 3.2 NAME		☐ Change ☐ Addition
NAME Street address			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-SI-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		T occurs	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	ertify that the into marine supplied with	this filling Nose not grathy for	64 CITY-ST-ZIP	Section 119 07/3Vi). Florida Statutes. Liurthe	or certify that the information

indicated on this actual report or supplied with this lying opes not locality for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this actual report or supplied empty 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 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 exachment with an address.

1/16/191

FILED

Jan 27 1998 8:00am

Secretary of State