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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000042441

RODRIGI	JEZ GONZALEZ PRODUCI	ION, INC.							
Principal Place of Business Mailing Address						1 (30)(40) ((8)	/(   <b>                                   </b>		1881 1191 1891
13243 NW 10 TERRACE 13243 NW 10 TERRACE MIAMI FL 33182 MIAMI FL 33182							O NOT WOITE IN TH	IIC CDACE	
						3. Date Incorporated	O NOT WRITE IN TH	IIS SPACE	
						1	or qualifed		
	(0.1	2a. Mailing Ad	droop.			05/13/1997 4. FEI Number		→ Anr	lied For
	lace of Business	<u> </u>	uiess			65-0753375		<u> </u>	Applicable
21 26 Suite, Apt. #, etc. Suite, Apt. #,			# etc			05 07 5557 5		\$8.75 A	
	#, <del>6</del> 16.	27			<ol><li>Certificate of Statu</li></ol>	ıs Desired	Fee Rec		
City & State	•	City & State			6. Election Campaig	n Financing	\$5.00 M	May Re	
	<del>.</del>	28	¬ '			Trust Fund Contribution  Added to Fees			
Zip	Country	Zip		Country		8. This corporation of		Intangible	
24	25	29	30	,		Personal Property			□No
24]	9. Name and Address of Curre			$\Box$		10. Name and Addre		ed Agent	
	g, Maine und Addiess of Carro	it itsgistered riger	·	81	Name				
RODRIGUEZ, MARISOL SOTO							A. A. A		
13243 NW 10 TERRACE				82	Street Ad	dress (P.O. Box Number is	Not Acceptable)		
MIAMI FL 33182					-				
				84	City		F	85 Zip C	ode
	to the provisions of Sections 607.05		*** *** ***			tion automita this state	•	_ , ,	registered
office or r	to the provisions of Sections 607.05 registered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such cha	ande was author	nzea ov	the corpora	tion's board of directors.	nereby accept the app	pointment as reg	jister <del>e</del> d
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable.	(NOTE: Regis	tered Age	nt signature requi	ired when reinstating)	DATE		
12.		ND DIRECTORS		13.			GES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	PTD			1.1 TITLE				☐ Change	Addition
NAME	RODRIGUEZ, MARISOL SOTO			1.2 NAME					
STREET ADDRESS	13243 NW 10 TERRACE			13STREE	TADDRESS				
	MIAMI FL 33182			1.4 CITY-S					
CITY-ST-ZIP TITLE	VSD			2.1 TITLE				☐ Change	Addition
NAME	GONZALEZ, JUANA MARIA	_		2.2 NAME					
	13243 NW 10 TERRACE				T ADDRESS				
STREET ADDRESS	MIAMI FL 33182			2. 4 CITY-					
CITY-ST-ZIP	MIAMI PL 33102			3.1 TITLE	51-ZIP			Change	Addition
				3.2 NAME					
NAME					T ADDRESS				
STREET ADDRESS				3.4. CITY-:					
CITY-ST-ZIP				4.1 TITLE	51-ZIP			Change	☐ Addition
TITLE									
NAME				4. 2 NAME	1				
STREET ADDRESS					TADDRESS				
CITY-ST-ZIP				4.4 CITY-5	ST-ZIP		<del></del>	Change	Addition
TITLE		L		5.1 TITLE					
MARKE	!		1	5.2 NAME	f				

14. 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 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 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 changed, or on an attachment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE: \_

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Augna Po Fonzalez

DELETE

☐ Addition

☐ Change