

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 03, 2004 8:00 am
Secretary of State

08-03-2004 90005 048 ***150.00

DOCUMENT # P97000050330

1. Entity Name
RODVEN INTERNATIONAL, INC.



Principal Place of Business
**2100 CORAL WAY
SUITE 700
MIAMI, FL 33145**

Mailing Address
**3191 CORAL WAY
SUITE 110
MIAMI, FL 33145**

03000433



2. Principal Place of Business

3. Mailing Address

2100 Coral Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 700

City & State

City & State

MIAMI, FL

Zip

Country

Zip

Country

33145

USA

07062004

Chg-P

CR2E034 (10/03)

4. FEI Number

65-0771344

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MIAMI CORPORATE SYSTEMS, INC.
5200 BLUE LAGOON DRIVE
SUITE 700
MIAMI, FL 33126**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 reinstalling)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPD
RODRIGUEZ, RODOLFO JR.
2100 CORAL WAY, STE 700
MIAMI, FL 33145** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GOMEZ, LUIS E
2100 CORAL WAY, STE 700
MIAMI, FL 33145** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BANDEL, STEVEN
2100 CORAL WAY, STE 700
MIAMI, FL 33145** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
CASTILLO, FELIX
2100 CORAL WAY, STE 700
MIAMI, FL 33145** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/06/04

Date

(305) 860-4460

Daytime Phone #