SECOND NOTICE: CORPORATION W AMOUNT DOE ON OR BEFORE 09/30/98: 8 PROFIT CORPORATION ANNUAL REPORT 1998	550 (IF DISSOLVED, MINIMUM AMOUNT DUE FLORIDA DEPAR Sandra B Secretar		FILED Sep 15 1998 8:00am Secretary of State
DOCUMENT # P97 1. Corporation Name RODOR, INC.	000072234 (2)		
Principal Place of Business 2717 NORTH OCEAN BLVD BOCA RATON FL 334\$1	Mailing Address 2717 NORTH OCEAN BLVD BOCA RATON FL 33431	,	DO NOT WRITE IN THIS SP ACE 3. Date Incorporated or Qualified
2. Principal Place of Business 21 Suite, Apt. #, etc,	2a. Mailing Address 26 Suite, Apt. #, etc.		08/20/1997 Applied For 4. FEI Number Applied For 05-0779 Not Applicable 5. Certificate of Status Desired \$8.75 Additional
22 City & State 23 Zip Country	27 City & State 28 Zip	Country	5. Certificate of Status Desired Fee Required Fee Required S. Election Campaign Financing Trust Fund Contribution S. This corporation owes or has paid the current year Intangible
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SPRITZER, MICHAEL 81 Name 7700 N KENDALL DRIVE #805 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33156 83 84 City FL 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 SIGNATURE Signature, typed or printed name of re	the obligations of, section 607.0505, Flo	rida Statutes. TE: Registered Agent signature req	uired when reinstaling) DATE
	CERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D NAME ALROD, ROBERT STREET ADDRESS 2717 NORTH OCEAN I CITY-ST-ZIP BOCA RATON FL 3343		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition Addition
TITLE D NAME ALROD, DOREEN STREET ADDRESS 2717 NORTH OCEAN I CITY-ST-ZIP BOCA RATON FL 3343	DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	Change Addition
TITLE NAME STREET ADDRESS	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	Change Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	DELETE	3 4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	Change Addition
CITY-SI-ZIP TITLE NAME STREEY ADDRESS CITY-ST-ZIP	DELETE	4 4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DELETE	54 CITX-ST-ZIP 61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	400002642394 -09/17/9801072003 ****550.00
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.			