Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90133 046 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # POROCO18735

1. Corporation RODRIM	AN INTERNATIONAL CORPO				
Principal Place	of Business	Mailing Address		A IMPLIABLE OF SOLES INTO SOLES AND SERVICE OF THE	)! !! <b>!!!</b> ! ! <b>!!</b> !!! ! <b>!!!!!</b> !!!!! !!!!! !!!!!
6301 COLLINS AVE 6301		6301 COLLINS AVE			
#1403		#1403		DO NOT WRITE IN THIS SPACE	
MIAMI BEACH FL 33141 MIAMI BEACH FL 33141			3. Date Incorporated or Qualifed	3 SPACE	
				02/26/1998	
2. Principal Place of Business 2a.		2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0823552	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27			
City & State	Đ	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 3	Country	This corporation owes the current year to     Personal Property Tax.	ntangible □Yes □No
	9. Name and Address of Curren		<u> </u>	10. Name and Address of New Registere	d Agent
81 Name					
LOPEZ, JOSE			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
6301 COLLINS AVE			Sirect Addi		
#1403			83		, ,
MIAMI BEACH FL 33141			84 City		85 Zip Code
					Land A Barrier and A Barrier and
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 a	m familiar with, and accept the obligat	ions of, Section 607/0505, Florid	la Statutes.		100
SIGNATURE	le - Lu	a. M.		PODRIBUEZ 3/1	2/99
12.	Signature, typed of printed name of registered agen OFFICERS AN	· · · · · · · · · · · · · · · · · · ·	egistered Agent signature require	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	PTD	□ DELETE	1.1 TITLE	-	☐ Change ☐ Addition
NAME	RODRIGUEZ, LUIS A		1.2 NAME	•	
STREET ADDRESS	6301 COLLINS AVE, #1403		1.3 STREET ADDRESS		
l l	MIAMI BEACH FL 33141		1.4 CITY-ST-ZIP	•	
CITY-ST-ZIP TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	RODRIGUEZ, ROSINA		2.2 NAME	•	(
STREET ADDRESS	6301 COLLINS AVE, #1403		2.3 STREET ADDRESS		-
CITY-ST-ZIP	MIAMI BEACH FL 33141		2, 4 CITY-ST-ZIP	a management of grown and a second	\$ ** - **
TITLE	S	☐ DELETE	3.1 TITLE	<del>-</del>	☐ Change ☐ Addition
NAME	RODRIGUEZ, JESSICA		3.2 NAME		
STREET ADDRESS	6301 COLLINS AVE, #1403		3.3 STREET ADDRESS		4
CITY-ST-ZIP	MIAMI BEACH FL 33141		3.4. CITY-ST-ZIP		, _
TITLE	110 1111 000 1011	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4, 2 NAME		, .
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		* . F
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		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP