


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90183 008 ***158.75

DOCUMENT # P99000025843

1. Entity Name
JUAN AND E. RODRIGUEZ STUCCO, INC.




Principal Place of Business Mailing Address

1408 42ND STREET **1408 42ND STREET**
ORLANDO, FL 32839 **ORLANDO, FL 32839**

DO NOT WRITE IN THIS SPACE

14004610



04252005 No Chg-P CR2E034 (10/03)

| | |
|--|---------------------------------------|
| 4. FEI Number 59-3568707 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$8.75 Additional Fee Required |

6. Name and Address of Current Registered Agent

RODRIGUEZ, JUAN
1408 42ND STREET
ORLANDO, FL 32839

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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: X Juan Rodriguez DATE: 04/25/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|----------------|-------------------|
| TITLE | PD |
| NAME | RODRIGUEZ, JUAN |
| STREET ADDRESS | 1408 42ND STREET |
| CITY-ST-ZIP | ORLANDO, FL 32839 |
| TITLE | V |
| NAME | COLIMA, ARMANDO |
| STREET ADDRESS | 1408 42ND ST. |
| CITY-ST-ZIP | ORLANDO, FL 32839 |
| TITLE | S |
| NAME | RIVAS, DAVID |
| STREET ADDRESS | 1408 42ND ST. |
| CITY-ST-ZIP | ORLANDO, FL 32839 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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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: X Juan Rodriguez DATE: 04/25/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #