

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90004 048 ***150.00

DOCUMENT # P99000075557

1. Entity Name
ROOD ENTERPRISES, INC.

Principal Place of Business
 10586 TROPICAL BREEZE LN.
 BOYNTON BEACH FL 33437

Mailing Address
 10586 TROPICAL BREEZE LN.
 BOYNTON BEACH FL 33437

2. Principal Place of Business
10586 TROPICAL BREEZE
 Suite, Apt. #, etc.

3. Mailing Address
10586 TROPICAL BREEZE LN
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State
BOYNTON BEACH FL
 Zip
33437
 Country
USA

City & State
BOYNTON BEACH FL
 Zip
33437
 Country
USA

4. FEI Number
65-0975713

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

ROOD, LEONARD
 10586 TROPICAL BREEZE LN.
 BOYNTON BEACH FL 33437

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.

SIGNATURE *Leonard Rood*
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-03-02
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROOD, LEONARD 10586 TROPICAL BREEZE LN. BOYNTON BEACH FL 33437	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROOD, RUTH 10586 TROPICAL BREEZE LN. BOYNTON BEACH FL 33437	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Leonard Rood*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-03-02
 Date Daytime Phone #

CR2E034 (9/01)

Attachment

824651

ROOD ENTERPRISES, INC.

10586 Tropical Breeze Lane

Boynton Beach, FL 33437

(561) 733-1498

(561) 733-8943 Fax

E:Mail: Lencell@concentric.net

#P990000 75557

February 13, 2002

Florida Department of State

Division of Corporations

P.O. Box 1500

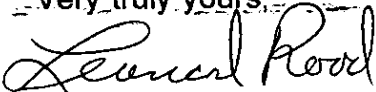
Tallahassee, FL 32314

Gentlemen:

I received your letter concerning lack of a check for \$150 which was sent to you on 1/2/2002 along with your report form. The check number was 690.

Apparently the check has been lost. I am cancelling check # 690 and am herewith sending a new check in the amount of \$150.00.

Very truly yours,



Leonard Rood