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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S3014

(5)

RODY ELECTRONICS, INC.

Principal Place of Business Mailing Address

## FILED Apr 23 1998 8:00am Secretary of State



r mopar race	Or Eddingon					
13220 S.W. 27TH LANE MIAMI FL 33175		13220 S.W. 27TH LANE MIAMI FL 33175		DO NOT WRITE IN THIS	SPACE	
				3. Date Incorporated or Qualified	OI NOL	
				1		
A Detection ( Die	-	2a. Mailing Address		02/07/1991 4. FEI Number	Applied For	
2. Principal Place of Business		<u></u>			Not Applicable	
Suite, Apt #, etc		Suite, Apt. #, etc.		65-0241429	\$8.75 Additional	
Suite, Apr. #, etc.		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State	<del>-</del>	6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu		
24	25	29	30	Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered	Agent	
ALE	BA, HILARIO O.		81 Name			
13220 S.W. 27TH LANE			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
MIAMI FL 33175						
			83			
			84 City		85 Zip Code	
				FI	_ [	
11. Pursuant te	o the provisions of Sections 607.0	502 and 607.1508, Florida Statu	ites, the above-named co	orporation submits this statement for the purpose	of changing its registered	
office or re	egistered agent, or both, in the Sta	ite of Ftorida. Such change was ligations of Section 607 0505. F	authorized by the corpor	ration's board of directors. I heroby accept the ap	pointment as registered	
	mamiliar with, and accept the ob-	rigations of Section Correction, i	iorida dialdies.			
SIGNATURE	Signature, typed or printed name of registered i	noest and the discosed by (NO	OTE Ringistered Agent signature red	guired when reinstating) DATE		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12	
TULE	D	DELETE	1.1 TITLE		Change Addition	
NAME	ALBA, HILARIO O.		1.2 NAME			
STREET ADDRESS	13220 S.W. 27TH LANE		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP			
TITLE	IND WIN I C	DELETE	2.1 TITLE		Change Addition	
NAME		<del>-</del>	2.2 NAME		·	
			2.3 STREET ADORESS			
STREET ADDRESS						
CITY-ST-ZIP	·-··	DELETE	2 4 CITY - ST - ZIP 3.1 TITLE		Change Addition	
TITLE						
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	3.4 CITY-ST-ZIP		Change Addition	
TITLE			4.1 TITLE		C Oligingo C recontion	
NAME			4. 2 NAME		•	
STREE1 ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4.4 CITY-ST-ZIP		Change Addition	
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	61 THILE		Change Addition	
NAME			6 2 NAME			
STREET ADDRESS			63 STREET ADDRESS			
City-St-Zip			64 CITY-ST-ZIP			
14. Lherehy c	ertify that the information supplied	with this filing does not qualify	for the exemption stated	in Section 119.07(3)(i), Florida Statutes. I further of	certify that the information	

4. Thereby certify that the information supplied with this filting 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 is 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 trusted 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 angless.

SIGNATURE

Flu O. an

4/16/98

(301) PV8-2212