

FILE NOW: FILING FEE AFTER MAY 1 IS \$220.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS



APPROVED AND FILED

95 MAY -1 AM 11:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V46980 (1)

1. Corporation Name
RODWAL CORPORATION

Principal Place of Business Mailing Address

7056 NW 77 COURT 7056 NW 77 COURT
MIAMI FL 33166 MIAMI FL 33166
US US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/30/1992** 3a. Date of Last Report: **06/14/1994**

4. FFI Number: **65-0389037** Applied For: Not Applicable

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

6. Election Campaign Financing: **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business 2a. Mailing Address

21 State Apt # etc 26 State Apt # etc

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**CASTRO, WALDO A.
8225 S.W. 107 AVE., #D
MIAMI FL 33173**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.050(2) 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 the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	CASRO, WALDO A.
STREET ADDRESS	7056 N.W. 77 CT.
CITY, ST, ZIP	MIAMI FL
TITLE	VPSD
NAME	CASTRO, ROSSANA L.
STREET ADDRESS	7056 NW 77 COURT
CITY, ST, ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 130.02(6)(b), Florida Statutes. I further certify that the information submitted 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, unchanged, or in an attachment with an address.

SIGNATURE: **Waldo A. Castro President**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-27-95 (305)5929216

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Norment
Secretary of State
DIVISION OF CORPORATE FILINGS

APPROVED
6/10/95

9:11 AM JUN 10 1995

RECEIVED
TUESDAY, JUN 10 1995

DOCUMENT # **V47094** (0)

1. Corporation Name
MJAL INVESTMENTS, INC.

Principal Place of Business: **11410 S.W. 88 ST. STE. #308 MIAMI FL 33176**
Mailing Address: **11410 S.W. 88 ST. STE. #308 MIAMI FL 33176**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **06/23/1992** 3a. Date of Last Report: **04/26/1994**

4. FEI Number: **65-0353565** Applied For: Not Applicable:

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

6. Election Campaign Financing: **\$5.00 May Be Added to Fees**

7. This corporation has liability for intangible tax under § 193.032, Florida Statutes: Yes No

2. Principal Place of Business		2a. Mailing Address	
21 State Apt. # etc	22 City & State	26 State Apt. # etc	27 City & State
24 Zip	25 Country	29 Zip	30 Country

9. Name and Address of Current Registered Agent
**LONDONO, MIGUEL
11410 SW 88TH ST.
#308
MIAMI FL 33176**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83 City	
84 State	

11. Pursuant to the provisions of Sections 607.02(5) and 607.15(8), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officer 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 the obligations of, Sections 607.02(5), Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	LONDONO, MIGUEL
STREET ADDRESS	11410 S.W. 88TH ST., #308
CITY, ST, ZIP	MIAMI FL
TITLE	D
NAME	LONDONO, JAIME
STREET ADDRESS	11410 S.W. 88TH ST, #308
CITY, ST, ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN '95

14 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
15 NAME	
16 STREET ADDRESS	
17 CITY, ST, ZIP	
18 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
19 NAME	
20 STREET ADDRESS	
21 CITY, ST, ZIP	
22 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
23 NAME	
24 STREET ADDRESS	
25 CITY, ST, ZIP	
26 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
27 NAME	
28 STREET ADDRESS	
29 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 of changes or on an attachment with an address.

SIGNATURE: *Miguel Londono*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-95 305-274 8903