05-10-1999 90219 043 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **V46980**

1. Corporation Name

RODWAL CORPORATION

Principal Place	e of Business	Mailing Address							
7056 NW 77 COURT		7056 NW 77 COURT							
MIAMI FL 33166 US		MIAMI FL 33166 US			DO NOT MO	TE IN TIJIC	CDACE		
						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
						06/30/1992			
a D-iii Di	lana of Dunings	2 Moiling Addross				4. FEI Number		Anı	olied For
—	ace of Business	2a. Mailing Address				1 '''		<u> </u>	Applicable
21		26 Suite And Hosto				65-0389037		\$8.75 A	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Fee Red	
22		City & State							<u> </u>
City & State		— <u> </u>				6. Election Campaign Financing Trust Fund Contribution		\$5.00 r Added to	,
23 Country		Zip Country				-			7 (663
Zip Country						This corporation owes the curl Personal Property Tax.	ent year in		□No
24 25		1 - 1 - 1 - 1 - 1 - 1			10. Name and Address of New I	2enistered			
	9. Name and Address of Curr	ent Registered Agent	8	1	Name	10. Haire and Address of New I	tegister co	Agent	
CASI	TRO, WALDO A.		o Name						
7056 NW 77 COURT			8:	2	Street Addre	ss (P.O. Box Number is Not Accept	able)		
MIAMI FL 33166			L	_					
MIAN	III FL 33 100		8:	3					
			8	4	City		FI	85 Zip C	ode
44 Durewent	to the provisions of Sections 607.0	502 and 607 1508. Florida Statutes	the abo	ve-r	named corpo	ration submits this statement for the	purpose of	changing its	registered
office or re	egistered agent, or both, in the Sta	ite of Florida. Such change was authigations of, Section 607.0505, Florid	horized by	y th	ne corporation	n's board of directors. I hereby acce	ot the appoi	ntment as reg	istered
SIGNATURE							DATE		
			egistered Agent signature requi		signature required	ADDITIONS/CHANGES TO OF		ID DIRECTO	PS IN 12
12.		DELETE	13.		T	ADDITIONS/CHANGES TO OF	FICERS AI	Change	Addition
TITLE	PD	C) DELETE	1.2 NAME						
NAME	CACITO, WILDO A.								
STREET ADDRESS	7000 11.11. 77 01.		1.3 STRE						
CITY-ST-ZIP	MIAMI FL		1.4 CITY-		ZIP			☐ Change	Addition
TITLE	VPSD	☐ DELETE	2.1 TITLE					☐ Change	☐ Addition
NAME	Chomo, nocorum E.		2.2 NAME						
STREET ADDRESS	7056 NW 77 COURT 235		2.3 STRE	ETA	ODRESS				
CITY-ST-ZIP	MIAMI:FL		2. 4 CITY-	2. 4 CITY-ST-ZIP					
TITLE	☐ DELETE 3.11		3.1 TITLE	3.1 TITLE				Change	☐ Addition
NAME	3.21		3.2 NAME						
STREET ADDRESS	3.3 S		3.3 STRE	ET A	ADDRESS				
CITY-ST-ZIP	34 (3.4 CITY-	-ST-	ZIP				
TITLE	☐ DELETE 4.1 T		4.5 TITLE	4.5 TITLE				Change	☐ Addition
NAME		4. 2		4. 2 NAME					
STREET ADDRESS			4.3 STRE	ET A	ODRESS				
CITY-ST-ZIP	4.4 CI		4.4 CITY-	ST-2	ZIP				
TITLE			5.1 TITLE	5.1 TITLE				Change	☐ Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STRE	ETA	ODRESS				1
CITY-ST-ZIP			5.4 CITY-	ST-Z	ZIP				
TITLE	<u></u>			6.1 TITLE				Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			63 STRE	ET A	ADDRESS				
O IUPE I WODINE 99	l				1				

SIGNATURE:

CITY-ST-ZIP

G OFFICER OR DIRECTOR

14. I hereby certify that the information supplied with this biffig 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 alcoaccurate 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 receive of trustee employeed 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 attaction with an address, with all other like empowered.

Daytime Phone #