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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000092000**1. Corporation Name

RUDI PROPERTIES, INC.

FILED Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90094 043 ***150.00



					\$831 0 11 0 13 00 131	
Principal Place	e of Business	Mailing Address				
1715 EAST BAY DR., STE B						
LARGO FL 33771 US		LARGO FL 33771 US		DO NOT WRITE IN THIS	SPACE	
00		00		3. Date Incorporated or Qualifed 12/16/1994		
	lace of Business	2a. Mailing Address		4. FEI Number	Ar	plied For
21 9 Bru	co B. Veglite.	26 POBYUCE B.	Vegite_	59-3282845	Nc	at Applicable -
Suite, Apt.		Suite, Apt. #, etc. 27 41 8 Midwa	y Island	5. Certificate of Status Desired	\$8.75 / Fee Re	Additional equired
City & State	ixwater, FL	City & State 28 Clearwate	r. FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	May Be to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	tangible	
24 33	767 25 USA	29 33767 30	USA	Personal Property Tax.	Yes	No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered	Agent	
VEGI			81 Name	GHTE, BRUCE B		
1715 EAST BAY DR., STE B			82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
	GO FL 33771		83	Midway 13/and		
				•		
			84 City C	learnater FL	- 33	767
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes, of Florida, Such change was author	the above-named co	orporation submits this statement for the purpose of ation's board of directors. I hereby accept the appo	changing its intment as re	registerea gistered
agent. I a	m familiar with and accept the obligati	ions of, Section 607.0505, Florida	Statutes.	11-10	0	-
SIGNATURE	Whileard Cotton	Alle		1/7/9	<u>7</u>	
	rigitature, typed or printed name of registered agent		gistered Agent signature req		ND DIRECTA	NPS IN 12
12.	OFFICER AND	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change	Addition
TITLE	Vecente putu w	☐ AETELE	1.1 HILE			
NAME	VEGHTE, RUTH W		i i	•		
STREET ADDRESS	1715 EAST BAY DR., STE B		1.3 STREET ADDRESS	· ·		
CITY-ST-ZIP	LARGO FL 33771		1.4 CITY-ST-ZIP 2.1 TITLE		Change	Addition
TITLE	_		2.7 NAME			_
NAME	VEGHTE, RICHARD C			<u>حسان بالمعارف حساسات في من المحالة من بالمحالة المناسات والمناسات والمناسا</u>		
STREET ADDRESS	- 1715-EAST-BAY-DR.; STE-B		2.3 STREET ADDRESS	_		
CITY-ST-ZIP	LARGO FL 33771	☐ DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	<u> </u>	Change	Addition
TITLE	D VEGUTE POLICE P	C) Detere	3.2 NAME			
NAME	Veghte, Bruce B 1715 East Bay Dr., Ste B		3.3 STREET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP	LARGO FL 33771		3.4. CITY-ST-ZIP 4.1 TITLE		Change	Addition
TITLE	D VECHTE IOHN W.SB		4.2 NAME	,	V-	
NAME	VEGHTE, JOHN W SR.		i			
STREET ADDRESS	1715 EAST BAY DR., STE B		4.3 STREET ADDRESS 4.4 City-St-Zip	<i>,</i> ,		
CITY-ST-ZIP	LARGO FL 33771	DELETE	5.1 TITLE		Change	Addition
TITLE		ال المالات	5.2 NAME	· :		
NAME			5.3 STREET ADDRESS	• •		
STREET ADDRESS		}	5.4 CITY-ST-ZIP			
CITY-ST-ZIP		□ DELETE	6.1 TITLE		Change	Addition
TITLE		□ OCTE16	6.2 NAME		94	
NAME			1	·		
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 C/TY-ST-ZIP			

14. 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 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 if changed, or an an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP