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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600001488 (3)

RDL HOLDINGS, INC.

STREET ADDRESS

Principal Place of Business Mailing Address			Mailing Address		I (48448 NIS INIT SIN SON SON SON	diffe tinte fiffet fatat ente enne
148 BAUSALITO BLVD #150 148 SAUSALITO BLVD #			149 SAUSALITO BLVD #1	50		
CASSELBERRY FL 32707 CASSELBERRY FL 32707			CASSELBERRY FL 32707		DO NOT WRITE IN TH	IIS SPACE
			•		3. Date Incorporated or Qualified	- IO OF MOL
					03/22/1996	
9	Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	Tuncipai rii 	ace of Desiriess	26		59-3328447	Not Applicable
<u> </u>	Suite, Apt.	#. etc.	Suite, Apt. #, etc.			\$8.75 Additional
22			27		5. Certificate of Status Desired	Fee Required
==1	City & State	y & State City & State			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	
24		25		30	Personal Property Tax due June 30.	Yes No
		9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
Haase, roland a Sr						
148 SAUSALITO BLVD #150				82 Street A	ddress (P.O. Box Number is Not Acceptable)	
CASSELBERRY FL 32707						
				63		
ĺ				84 City		85 Zip Code
						L 85 Zip Code
11. Pursuant to the provisions of Sections 607 (1502 and 607, 1508, Florida Statules, 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 Signature, typed or prefections on trigistered agent and title if applicable (NOTE: Repotered Agent signature required when reinstating) DATE						
12		OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	_
	TLE I	CV	DELETE	1.1 TOLE		Change Addition
	VME	HAASE, RONALD A SR	—	1.2 NAME		
	REET ADDRESS	329 TATER KNOB ROAD		1.3 STREET ADDRESS		
	TY-ST-ZIP	FRANKLIN NC 28744		1.4 CITY - ST - ZIP		
-	TLE	P	DELETE	2.1 TITLE		☐ Change ☐ Addition
1	AME	HAASE, ROBIN L		2.2 NAME		
ST	REET ADDRESS	329 TATER KNOB ROAD		2.3 STREET ADDRESS		
	TY-ST-ZIP	FRANKLIN NC 28744		2. 4 CITY - ST - ZIP		
-	TLE	D	DELETE	3.1 TITLE		☐ Change ☐ Addition
N/	WE	HAASE, JUNE A		3.2 NAME		
ST	REET ADDRESS	6601 SW 18TH CT		3.3 STREET ADDRESS		
CI	TY-ST-ZIP	FT LAUDERDALE FL 33324		3 4. CITY - ST - ZIP		
TIT	TLE	D	DELETE	4 1 TITLE		Change L Addition
N/	VME.	HAASE, JAMES J		4 2 NAME		
ST	TREET ADDRESS	8601 SW 18TH CT		4.3 STREET ADDRESS		
CI	TY-ST-ZIP	FT LAUDERDALE FL 33324		4.4 CITY-ST-ZIP		
Til	TLE		☐ DELETE	5.1 TITLE		Change Addition
N	AME			. 5.2 NAME		
81	TREET ADDRESS			5.3 STREET ADDRESS		
Cr	TY-ST-ZIP			5.4 CITY-ST-ZIP		
10	TLE		☐ DELETE	6.1 TITLE		Change Addition
NA.	AMF			6.2 NAME		

6.3 STREET ADDRESS

6.4 CITY-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 trustoe 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 address.