

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L54831

Entity Name

R.D.K. INVESTMENTS, INC.

FILED

Feb 22, 2000 8:00 am  
Secretary of State

02-22-2000 90034 006 \*\*\*150.00

1. Principal Place of Business      Mailing Address

E ATLANTIC BLVD      2605 E. ATLANTIC BLVD.  
212      STE 212  
BEACH FL 33062      POMPANO BEACH FL 33062-4948  
US

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

6. Name and Address of Current Registered Agent

RUNDLE, TERRY  
2605 EAST ATLANTIC BLVD  
STE 212  
POMPANO BEACH FL 33062

4. FEI Number      65-0191315      Applied For  
Not Applicable

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

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City      FL      Zip Code

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE      Signature, typed or printed name of registered agent and title if applicable.      (NOTE: Registered Agent signature required when reinstating)      DATE

This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2000 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing      \$5.00 May Be  
Trust Fund Contribution.      Added to Fees

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
PD KEELER, ROBERT D. 5355 TOWN CENTER RD #801 BOCA RATON FL VP RUNDLE, TERRY 2605 EAST ATLANTIC BLVD STE 212 POMPANO BEACH FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:      Terry Rundle      2-16-00      954 782 3666  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/99)