

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 22, 2003 8:00 am**  
**Secretary of State**

01-22-2003 90143 020 \*\*\*150.00

**DOCUMENT # L54831**

1. Entity Name  
R.D.K. INVESTMENTS, INC.



Principal Place of Business  
2605 E ATLANTIC BLVD  
STE 212  
POMPANO BEACH FL 33062  
US

Mailing Address  
2605 E. ATLANTIC BLVD. STE  
STE 212  
POMPANO BEACH FL 33062  
US



2. Principal Place of Business  
2303 W. MCNAB ROAD  
Suite, Apt. #, etc.  
#7

3. Mailing Address  
P.O. Box 770397  
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State  
POMPANO BEACH FL

City & State  
CORAL SPRINGS FL

4. FEI Number 65-0191315

Applied For  
Not Applicable

Zip 33069 Country USA

Zip 33077 Country USA

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

**6. Name and Address of Current Registered Agent**

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

**7. Name and Address of New Registered Agent**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
2303 W. MCNAB ROAD #7  
City POMPANO BEACH FL Zip Code 33069

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME KEELER, ROBERT D.  
STREET ADDRESS 5355 TOWN CENTER RD #801  
CITY-ST-ZIP BOCA RATON FL

TITLE VP  
NAME RUNDLE, TERRY  
STREET ADDRESS 2605 EAST ATLANTIC BLVD STE 212  
CITY-ST-ZIP POMPANO BEACH FL

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS 2303 W. MCNAB ROAD #7  
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED RUNDLE  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-14-03  
Date

954-782-3666  
Daytime Phone #

CR2E034 (10/02)