

112

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

03 SEP 23 PM 3:42

DOCUMENT # **P01000001529**  
1. Entity Name  
**RHTA Enterprises, Inc.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business <b>1220 Wildwood Lakes</b>		3. Mailing Address <b>1220 Wildwood Lakes</b>	
Suite, Apt. #, etc. <b>105</b>		Suite, Apt. #, etc. <b>105</b>	
City & State <b>Naples FL</b>		City & State <b>Naples FL</b>	
Zip <b>32302</b>	Country <b>USA</b>	Zip <b>32902</b>	Country <b>USA</b>

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-3689525</b>		Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	

**DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **Heidi Hollingsworth**

Street Address (P.O. Box Number is Not Acceptable)  
**1220 Wildwood Lakes Blvd # 105**

City **Naples** FL **32902**

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

SIGNATURE **Heidi Hollingsworth** **Heidi Hollingsworth** **9/15/03**

Signature typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when re-installing) DATE

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

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

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D/P/S/T</b> <b>Hollingsworth, Heidi</b> <b>1220 Wildwood Lakes Naples FL</b> <b>32902</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>700023307627</b> <b>09/24/03--01065--024 **150.00</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>Hollingsworth Robin</b> <b>1220 Wildwood Lakes #105</b> <b>Naples FL 32902</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DO NOT WRITE IN THIS SPACE</b>
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13. 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 on an attachment with an address, with all other like empowered.

SIGNATURE: **Heidi Hollingsworth** **Heidi Hollingsworth** **9/15/03** **(321) 432-4816**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Filing Period

CR2E034B (12/01)

9/23

2/2

September 15, 2003

Uniform Business Reports  
Division Of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Re: Document # P01000001529  
RHTA ENTERPRISES, INC.

Dear Sir or Madam:

Please be advised that the corporate offices of RHTA ENTERPRISES, INC. had been moved from

760 Atlantic Drive                      TO    1220 Wildwood Lakes Blvd. #105  
Satellite Beach, Florida 32937        Naples, Florida 34114

the 2003 Uniform Business Report was never forwarded to our new address and we never received it or any subsequent notifications of renewal.

We beg the Division to reinstate the above named corporation without penalty or recourse for the reasons stated.

Please find enclosed a UBR and a check in the amount of \$150.00 for appropriate fees for the year 2003.

Sincerely,



Heidi Hollingsworth  
President