

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

*psyclat*

DOCUMENT # PD1000014979  
1. Entity Name  
RDB LOGISTICS SERVICE, INC.

FILED

02 DEC 23 AM 11:42

**DO NOT WRITE IN THIS SPACE**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
700009647037  
12/23/02--01100--002 \*\*150.00

2. Principal Place of Business  
480 W DOERR PATH  
Suite, Apt. #, etc.

3. Mailing Address  
480 W DOERR PATH  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
HERNANDO FL  
Zip  
34442

City & State  
HERNANDO FL  
Zip  
34442  
Country  
USA

4. FEI Number  
59-3704645  
Applied For  
Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

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

Name  
RICHARD LEFEVRE  
Street Address (P.O. Box Number is Not Acceptable)  
12825 NE 44 CT  
City  
Anthony FL Zip Code  
32617

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

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

**January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25  
Make Check Payable to Department of State**

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	<u>PRES</u> <u>Richard LEFEVRE</u> <u>12825 NE 44 CT</u> <u>Anthony FL 32617</u>
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<u>VP</u> <u>DEBORAH Huntington</u> <u>12825 NE 44 CT</u> <u>Anthony FL 32617</u>
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<u>Sec/TREAS.</u> <u>Shirley LEFEVRE</u> <u>480 W. DOERR PATH</u> <u>HERNANDO, FL 34442</u>
TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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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: Shirley Lefevre, Secy - Treas.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SHIRLEY LEFEVRE, Secy-Treas  
DEC. 12, 2002  
(352) 527-8686

CR2E034B (12/01)

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RDG LOGISTICS SERVICE, Inc.  
480 W Doerr Path  
Hernando, Fl. 34442

December 18, 2002

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, Fl. 32302-1500

Dear Sir:

Enclosed please find our Corp. annual report for the year 2002. The Corp. address has changed from: 19 Windtree Lane, Winter Garden, Fl 34787 to the above address. This happened late in 2001 and I never received the report forms and I didn't realize a report was due. I have since engaged a CPA firm and they advised us this form needed to be done.

Would you please accept the filing fee of \$150.00 and waive any penalties.

Thank you very much.

Yours truly,



Shirley Lefevre,  
Sec'y-Treas.

Enc. (2)