

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2004 8:00 am**  
**Secretary of State**

04-27-2004 90089 045 \*\*\*150.00

DOCUMENT # P03000130950

1. Entity Name  
RAD R&D INC.



Principal Place of Business  
6367 30TH AVE NORTH  
ST. PETERSBURG, FL 33710

Mailing Address  
6367 30TH AVE NORTH  
ST. PETERSBURG, FL 33710



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

PO Box 6271

04052004

Chg-P

CR2E034 (10/03)

City & State

City & State

North Logan, UT

4. FEI Number

20-0396014

Applied For

Not Applicable

Zip

Country

Zip

Country

84341

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEVITO, RAYMOND  
6367 30TH AVE NORTH  
ST. PETERSBURG, FL 33710

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Raymond DeVito

Raymond DeVito, President

4-20-04

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PT ☐ Delete  
NAME DE VITO, RAYMOND  
STREET ADDRESS 6367 30TH AVE NORTH  
CITY-ST-ZIP ST. PETERSBURG, FL 33710

TITLE VPS ☐ Delete  
NAME DE VITO, MARY L  
STREET ADDRESS 6367 30TH AVE NORTH  
CITY-ST-ZIP ST. PETERSBURG, FL 33710

TITLE D ☐ Delete  
NAME SCOTT, III, JAMES E  
STREET ADDRESS 5550 5TH WAY SOUTH  
CITY-ST-ZIP ST. PETERSBURG, FL 33705

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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:

Raymond DeVito Raymond DeVito

4-20-04

727-343-8652

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #