

10/10/2007 00:07 7725956893

KENNETH AUSTIN

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FROM :

FAX NO. :

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000067686 1. Entity Name RPD ENTERPRISES, INC.	
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Principal Place of Business 897 NW 82ND AVENUE CORAL SPRINGS, FL 33071	Mailing Address 897 NW 82ND AVENUE CORAL SPRINGS, FL 33071
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DO NOT WRITE IN THIS SPACE

FILED
07 OCT 10 PM 3:05
STATE
TALLAHASSEE, FLORIDA

07142007 No Chg-P CRZE034 (11/05)

4. FCI Number 27-0124122	Applied For Not Applicable
6. Certificate of Status Used ☐	\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent
PERRY, RONALD M
897 NW 82ND AVENUE
CORAL SPRINGS, FL 33071

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and No. 8 applicable (NETA, Registered Agent Signature required when changing)

FILE NOW!! FEE IS \$150.00
Due by September 14, 2007

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

In accordance with s. 807.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS PERRY, RONALD M 897 NW 82ND AVENUE CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV PERRY, DEBRA J 897 NW 82ND AVENUE CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PERRY, SHENAY M 897 NW 82ND AVENUE CORAL SPRINGS, FL 33071
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

* A/R Fycled under wrong
corp + \$10 connected to wrong
corp POS-67685-
Never received fect with
penalty fee waived
**DO NOT WRITE
IN THIS SPACE**
8/14/07 90008 035 -150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 on behalf of the corporation; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all officers and directors.

SIGNATURE: Debra J Perry 10/9/2007