

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 AUG -4 AM 9:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000087573 (0)

1. Corporation Name

R & D DIVERSIFIED, INC.

Principal Place of Business

7359 VAN LAKE DRIVE
ENGLEWOOD FL 34224

Mailing Address

7359 VAN LAKE DRIVE
ENGLEWOOD FL 34224

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1994

3a. Date of Last Report

07/17/1996

4. FEI Number

65-0455121

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

KEYES, GERRY
333 S MIAMI AVE
VENICE FL 34285

10. Name and Address of New Registered Agent

81 Name

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

600002262376--7

83

-08/08/97--01139--004

84 City

*****200.00

*****200.00

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

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

(NOTE: Registered Agent signature required when renewing)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP ☐ DELETE

NAME KRIEGER, RICHARD W
STREET ADDRESS 7359 VAN LAKE DR
CITY-ST-ZIP ENGLEWOOD FL

TITLE P ☐ DELETE

NAME KRIEGER, DIANNA L
STREET ADDRESS 7359 VAN LAKE DR
CITY-ST-ZIP ENGLEWOOD FL

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (4/97)

②

R&D DIVERSIFIED, INC.

7359 Van Lake Drive
Englewood, Florida 34224
Phone or FAX (941) 474-2979

Tuesday the Twenty-seventh
July, 1997

Florida Dept of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Sir or Madam,

Please find enclosed a re-submittal of our Corporation Annual Report. I spoke with the inquiry section of your office when we received a 2nd notice in the mail, and informed them that we had submitted the 1st notice report back in April, but that the check had not yet cleared our bank. We came to the conclusion that it has been lost in the mail or in processing, and she gave us the following instructions:

- 1) Complete the 2nd notice form
- 2) Send a copy of our check stub page from the original filing
- 3) Make a new check for payment
- 4) Change the address to re-file to PO Box 6327

We have completed all of the above and enclosed the appropriate information, and are forwarding these materials to our accountant, who is our Registered Agent. If you have any questions, please give me a call at the number listed above.

Sincerely,

