FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000019073 (3)

R.D.O. EXPRESS CHARTERS, INC.

FILED Apr 17 1998 8:00am Secretary of State

|--|

Principal Place of Business Mailing Address						
14201 GLENCOVE PLACE	14201 GLENCOVE PLAC					
DAVIE FL 33325 DAVIE FL 33325				DO NOT WRITE IN THIS SPACE		
US	U\$			3. Date Incorporated or Qualified	SFACE	
				03/10/1994		
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Ap	plied For
21	26			65-0488862	No	t Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22	27			5. Certificate of Status Desired	Fee Re	quired
City & State	City & State			6. Election Campaign Financing	\$5.00	May Be
23	28			Trust Fund Contribution	Added t	o Fees
Zip Country	Zip	Cour	ntry	8. This corporation owes or has paid the cu		
24 25	29	30				No
9, Name and Address of Curre	nt Registered Agent		81 Name	10. Name and Address of New Registered	Agent	
SLIVKA, MICHAEL A PA			81 Name			
1625 N. COMMERCE PKWY			82 Street A	Address (P.O. Box Number is Not Acceptable)		
SUITE 210		,				
FT. LAUDERDALE FL 33326			63			
			84 City		85 Zip (Code
				FL FL	_]	
11. Pursuant to the provisions of Sections 607.050	02 and 607.1508, Florida Statu of Florida, Such change was	utes, the ab	ove-named -	corporation submits this statement for the purpose cooration's board of directors. I hereby accept the appropriate the control of the coorage	of changing its	s registered
agent. I am familiar with, and accept the oblig	ations of, Section 607.0505, F	lorida Statu	ites.	orallo, to board of all bolors. Thoroby about the ap	301111111111111111111111111111111111111	gistores
SIGNATURE						
Signature, typicd or printed name of registered ag			Agent signature	required when reinstating) DATE		
12. OFFICERS AN	ID DIRECTORS DELETE	13. 1.1 TIT	e 1	ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
BURSONAL BOUAL		E .	I	•	L Change	
*****		1.2 NA				
DAME EL			REET ADDRESS			
CHI DI EN	DELETE	2.1 TIT	Y-ST-ZIP		Change	Addition
AAIDEN ATTUEN	-				LT Cliaride	☐ Addition
		2.2 NA	I			
DIA DINE VEV EL		L	EET ADDRESS			
	DELETE		Y-ST-ZIP		Change	Addition
TITLE	₩ DECEN	3.1 717	I		L. Change	L. Addition
NAME		3.2 NA	I			
STREET ADDRESS			REET ADDRESS			
CITY - ST - ZIP TITLE	DELETE		ry-S1-ZIP		Change	Addition
		4.1 TIT	I		U Ullalige	Addition
NAME CIDEST ADDOUGE		4. 2 NA				
STREET ADDRESS			REET ADDRESS			
CITY - ST - ZIP	DELETE	4.4 CIT 5.1 TIT	Y-ST-ZIP		Change	Addition
			I		L. Ullainge	CT AUDITION
NAME OXERY ADDRESS		5.2 NA	I			
STREET ADDRESS			REET ADDRESS			
CITY-SI-ZIP	DELETE		Y-ST-ZIP		Change	Addition
TITLE	□ NETGIE	6.1 TIT	I		C Change	L Admindi
NAME		6.2 NA	···			
STREET ADDRESS			REET ADDRESS			
CITY-ST-ZIP			Y-ST-ZIP	d in Section 119.07(3)(i). Florida Statutes. I further c		

14. Thereby 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 supplied 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 compatibility or the receiver or wester 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 an attachment with an address.

SIGNATURE: SIZOWWILLINGUERE

3-16-93 (954)382-074

R2E034 (10/97)