

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

FILED  
Apr 17 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P94000027232 (5)

1. Corporation Name

R.A.D. INVESTMENTS, INC.

Principal Place of Business

442 BOUCHELLE DRIVE  
SUITE 303  
NEW SMYRNA BEACH FL 32169  
US

Mailing Address

442 BOUCHELLE DRIVE  
SUITE 303  
NEW SMYRNA BEACH FL 32169  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/08/1994

4. FEI Number

65-0490090

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$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

21 104 PINEHURST CIRCLE

Suite, Apt. #, etc.

22

City & State

23 DAYTONA BEACH FL.

Zip

24 32114

Country

25 Volusia

2a. Mailing Address

26 104 PINEHURST CIRCLE

Suite, Apt. #, etc.

27

City & State

28 DAYTONA BEACH FL.

Zip

29 32114

Country

30 Volusia

9. Name and Address of Current Registered Agent

DELUCIA, ROBERT A  
442 BOUCHELLE DR.  
#303  
NEW SMYRNA BEACH FL 32169

10. Name and Address of New Registered Agent

81 Name

DELUCIA, ROBERT A.

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

104 PINEHURST CIRCLE

83

84

City DAYTONA BEACH

FL

85

Zip Code 32114

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P  
NAME DELUCIA, ROBERT A  
STREET ADDRESS 442 BOUCHELLE DRIVE, #303  
CITY-ST-ZIP NEW SMYRNA BEACH FL  
☐ DELETE

TITLE VTS  
NAME RICHARDS, DAN  
STREET ADDRESS 2214 6TH AVENUE S.E.  
CITY-ST-ZIP VERO BEACH FL  
☒ DELETE

TITLE VTS  
NAME DELUCIA, HELEN M  
STREET ADDRESS 442 BOUCHELLE DRIVE #303  
CITY-ST-ZIP NEW SMYRNA BEACH FL  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P  
1.2 NAME DELUCIA ROBERT A.  
1.3 STREET ADDRESS 104 PINEHURST CIRCLE  
1.4 CITY-ST-ZIP DAYTONA BEACH FL. 32114  
☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
☐ Change ☐ Addition

3.1 TITLE VTS  
3.2 NAME DELUCIA HELEN M.  
3.3 STREET ADDRESS 104 PINEHURST CIRCLE  
3.4 CITY-ST-ZIP DAYTONA BEACH FL. 32114  
☒ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP  
☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP  
☐ Change ☐ Addition

14. 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 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.

SIGNATURE

Robert A. Delucia

Robert A. Delucia

4-13-98

904-255-6664

CR2E034 (10/97)