## 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 #**1. Corporation Name 00042401 (5)

## Apr 20 1998 8:00am Secretary of State

RADIANT REART FRODUCTIONS, INC.					
Principal Plac	e of Business	Mailing Address			ANN 11010 CIRTL BLOLE ANION 1101 IRAL
9250 W. ATLANTIC BLVD		9250 W. ATLANTIC BI	IVD		
<b>#9</b> 15		<b>#9</b> 15		DO 1407140175 114	71.00.004.00
CORAL SPRINGS FL 33071 CORAL SPRINGS FL 3			33071	DO NOT WRITE IN	THIS SPACE
				3, Date Incorporated or Qualified	
<u> </u>		T = 44.90 - 4.41	····	05/17/1996	
<b></b>	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	N ata	26		59-34 13048	Not Applicable
<del>-</del>		Sulte, Apt. #, etc.		5. Certificate of Status Desired	\$8,75 Additional Fee Required
		City & State		- 5	
				6, Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	[28]   Zip	Country		
<b>—</b>	25	29	30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	Yes No
24	g. Name and Address of Curren		[30]	10. Name and Address of New Regist	
		it trogistarius rigorii	81 Name	IO: Italio and Adaross of Itali Italia	or o
	(NABB, RICHARD DAVID				
9250 W. ATLANTIC BLVD			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
	1915		B3		
	CORAL SPRINGS FL 33071		8		
			84 City		85 Zip Code
					FL   5 Zip Code
11. Pursuant	to the provisions of Sections 607.050; registered agent, or both, in the State	2 and 607.1508, Florida Statu of Florida, Such change was	ites, the above-named corp authorized by the corporat	poration submits this statement for the purp tion's board of directors. I hereby accept the	ose of changing its registered le
agent la	im familiar with, and accept the obliga	ations of, Section 607.0505, F	lorida Statutes		o apparition as registered
SIGNATURE					
	Signature, typod or printed name of registered age		TE Registered Agent signature requir		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	PT	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KNABB, RICHARD D		1.2 NAME		
STREET ADDRESS	9250 W. ATLANTIC BLVD., 1	<b>#</b> 915	1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY - ST - ZIP		
TITLE	VS	DELETE	2.1 TITLE		Change Addition
NAME	KNABB, RHONDA		2.2 NAME		1
STREET ADDRESS	9250 W. ATLANTIC BLVD., (	<b>#</b> 915	2.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33071		2. 4 CITY - ST - ZIP		
TITLE		☐ DELFTE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	•	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	41 TITLE		Change Addition
NAME		L.J PACETE	4. 2 NAME		
			I		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T BUILT	4.4 CITY-ST-ZIP		Change Lauder-
TITLE		☐ DELETE	5.1 THILE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		[
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CiTY-ST-ZiP		
	certify that the information supplied wi	ith this filing done not qualify		Section 119 07/3\/i) Florida Statutes I furti	per 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:

D. Kell Richard D. Knabb