

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000049407

1. Corporation Name  
RSA ENTERPRISES, INC.

Principal Place of Business  
12950 U.S. HWY. 1  
SEBASTIAN FL 32958

Mailing Address  
12950 U.S. HWY. 1  
SEBASTIAN FL 32958

FILED  
Apr 15, 1999 8:00 am  
Secretary of State

04-15-1999 90042 008 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
06/07/1996

4. FEI Number  
59-3380212

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RICHARD VAN ZYL  
12950 U.S. HWY. 1  
SEBASTIAN FL 32958

81 Name  
DIRK PARVUS  
82 Street Address (P.O. Box Number is Not Acceptable)  
9440 Doubloon Drive  
83 Vero Beach, FL 32963  
84 City  
Vero Beach FL 85 Zip Code  
32 963

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P/T  
NAME VAN ZYL, RICHARD H  
STREET ADDRESS 12950 U.S. HWY. 1  
CITY-ST-ZIP SEBASTIAN FL 32958

1.1 TITLE  
1.2 NAME P/T  
1.3 STREET ADDRESS DIRK PARVUS  
1.4 CITY-ST-ZIP 9440 Doubloon Drive  
Vero Beach, FL 32963

TITLE V/S  
NAME DEWEY MOORE  
STREET ADDRESS 4105 S FLAGLER DR  
CITY-ST-ZIP WEST PALM BCH FL 33405

2.1 TITLE  
2.2 NAME V/S  
2.3 STREET ADDRESS BRENDA PARVUS  
2.4 CITY-ST-ZIP 9440 Doubloon Drive  
Vero Beach, FL 32963

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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, with all other like empowered.

SIGNATURE: ✓

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/7/99 561-589-9122

CR2E034 (11/98)