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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARIMENT OF STATE

Sandra B. Mortham

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Jun 17 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000090359 (6)

RAD CONSULTING, INC.

CITY-ST-ZIP

Principal Place of Business Mailing Address 8787 SOUTHSIDE BLVD. STE 4914 8787 SOUTHSIDE BLVD. STE 4914 JACKSONVILLE FL 32256-3623 JACKSONVILLE FL 32256 3. Date Incorporated or Qualified 3a. Date of Last Report 11/04/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59 - 339 6848 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution П 23 Added to Fees 28 Country Country Zio 8. This corporation has liability for intangible tax under s. 199.032 Yes No 25 30 Florida Statutes 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PEPER, RICHARD C JR. 81 3020 HARTLEY ROAD STE 350 82 JACKSONVILLE FL 32257 83 Zip Code 33309 84 11. Pursuant to the provisions of Soctions 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. Charles Bender I SIGNATURE (NOTE_fingistered Agent's gnature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13, (96/6) DELETE Addition Change TITLE 1.1 1111.6 TAULER, NARCISO M 1.2 NAMÉ NAME 8787 SOUTHSIDE BLVD. STE 4914 1.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32256 1.4 CITY-ST-ZIP CITY-ST-ZIP Director, President DELETE Addition 2.110%€ TITLE BENDER, CHARLES M II NAME 2.2 NAME 2445 NW 33 Stut 8787 SOUTHSIDE BLVD. STE 4914 2.3 STREET ADDRESS STREET ADDRESS JACKSONVILLE FL 32256 CITY-ST-ZIP 2. 4 CITY - ST - ZIF DELETE Change TITLE 3.1 TITLE Addition 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-\$1-7IP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition 4.2 NAMI NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST-ZIP DELETE 51 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CiTY - ST - ZiP CITY-\$1-ZIP ... DELETE 6.1 T(1LF TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

64 CITY-ST-7IP

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 eath; 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 Statules; and that my name

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the

appears in Block 12 or Block 13 if changed, or on an attachment with an address Pal A Della abeka