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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 P9700043874

OOD CATEGORICE MIC

RDR ENTERPRISES, INC. Principal Place of Business Mailing Address 3236 WEBBER STREET 3236 WERBER STREET SARASOTA FL 34239 SARASOTA FL 34239 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 05/19/1997 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 65-0761474 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be City & State 6. Election Campaign Financing Trust Fund Contribution Added to Fees 28 23 Country 8. This corporation owes the current year Intangible Zip Country Zip □No 30 Personal Property Tax. 24 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name RODRIGUEZ, RICHARD 82 Street Address (P.O. Box Number is Not Acceptable) 3236 WEBBER STREET SARASOTA FL 34239 83 85 Zip Code 84 City Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered bits, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered accept the obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to the profisions of office or registere **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 S AND DIRECTORS 13. 12. OFFIGE ☐ DELETE ☐ Change 1,1 TITLE TITLE RODRIGUEZ, RICHARD D 12 NAME 3236 WEBBER STREET 1.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34239 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE 3.1 TITLE ☐ Change TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 5 1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP 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 of the receiver of 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 anyaddress, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET AUDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

ATUJE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

2/13/99

M1-320-0449

Change

Addition

Daytime Phone #

FILED Mar 06, 1999 8:00 am

Secretary of State

03-06-1999 90126 022 ***150.00

CR2E034 (11/98)