FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 21, 2002 8:00 am Secretary of State

U	HILOKW ROZINE	:22 KEPUKI	(UDN)	-		. , 200	C C4 - 4 -	
DOCUMENT # 797000054982					Secretary of State 05-21-2002 91237 041 ***150.00			
	RDK Truck Sale	& Service Inc						
DO NOT WRITE IN THIS SPACE								
2. Principal Place of Business 3214 Adamo 7. Suite, Apt. #, etc. 3. Mailing Address 3214 Adamo Suite, Apt. #, etc.			amo Pr.	DO NOT WRITE IN THIS SPACE				
City & State	Tampa FL	City & State		4. FEI N	umber 9-344 68 7		Applied For Not Applicable	
Zip 336	SO 5 Country USA	^{Zip} 33605	Country USA		icate of Status Desired	Fe Fe	3.75 Additional e Required	
	DO NOT W	RITE		ichard	D. Kemner umber is Not Acceptabl		gent	- - - -
IN THIS SPACE			321 City Tan		no Or.	FL	Zip Code 33609	7
SIGNATURE .	named entity submits this statement for Audio D Company Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	egistered office or regis Registered Agent signature requ	uired when reinstati	4/30/	OATE		
Tax filling r (See criter	oration is eligible to satisfy its Intangible equirement and elects to do so. ria on back) OFFICERS AND	After May 1, Amended Make Check Payable	, Fee is \$550.00 UBR is \$61.25		Election Campaign Fi Trust Fund Contribution		\$5.00 May Be Added to Fees	_
11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	President, Vice President Richard O. Kemner 3214 Adams Dr. Tampa, FL 33605	t, Sec., Treasurer	TITLE NAME STREET ADDRESS CITY-ST-ZIP	*				CR2E034B (12/01)
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13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like impowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/02 (813)241-071