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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000020733

1. Corporation Name

RDA AUTO TRANSPORT, INC.

ncinal Place of Business	Mai

8101 CLEAVES RD. N. FT. MYERS FL 33903 Mailing Address

BIOI CLEAVES RD. N. FT. MYERS FL 33903

FILED

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SECRETARY OF STATE. TABLAHABSEE, FLOORIDA



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						<u>/03/1998 </u>				
	ce of Business	Za. Mailing Add	ress		4. FEI	Number				ied For
Principal Plai	CR OI DOZIIIO22	26				65-09	330	<u> </u>		Applicable
Suite, Apt. #	etc	Suite, Apt.	#, etc.		5. Ca	rtifcate of Statu	s C esired		\$8.75 Ad	ſ
Suite, Apr. #1		27					<u> </u>	<u> </u>		
2		City & Stat	e			ction Campaig			\$5.00 N Added to	
City & State		28				st Fund Contri				rees
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7	25	29	30		Pa.	rsonal Property ime and Addre	18K.	Pagistared A		
<u> </u>	9. Name and Address of Current		t		10. Na	me and Addre	SS OT NOW	Kagisteres	-gui	
			•	81 Name						
GLOV	ÆR, DAVIÐ J			82 Street Ac	dress (P.C).	Box Number is	N I Acce	table)	Λ	
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11.27	MYERS PL 33903 Add	es -		83						
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				84 City	1. M	yaw,		FL	1 237	7/7
	the provisions of Sections 607.050	2 and E07 1508 F	orida Statutes.	the above-named co	orporation ::	Brnits this stat	emint for (1	e purpose of	changing its (niment as rec	egistered istered
11. Pursuant t	to the provisions of Sections 607.050% of the provisions of Sections 607.050% of the provisions of accept the obligations	of Florida. Such ch	ange was auth	orized by the corpor	ation's board	d of directors, i	nereby aca	praie appoi		
agent i ar	agistared agent, or both, in the State α π familiar with, and accept the obligat	tions of, Section 61	17.0505, Fiona	a Statutes.						
SIGNATURE			/NOTE: R	egistered Agent signature rec	pired when reas	deling)		DATE		00 (1) (0
	Signature, typed or printed name of registered agen OFFICERS AN	D DIRECTORS	11014.14	13.	AD	DITIONS/CHAI	NG S TO D	FFICERS AN	ID DIRECTO	RS IN 12
<u>12.</u>	OFFICERS AN		DELETE	1.1 TITLE	Theo		•		Change	T STORIGHT
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CITY-ST-ZIP	certify that the information supplied of on this annual report or supplement of director of the corporation or the ret 2 or Block 13 if changed, dron an att	With this filing does	not qualify for	the exemption state	d in Section	119.07(3)(i), F	lorida Statut Iegal effec	es. I further d as if made ur	erury marune ider oath; the	r Em an
14. I hereby Indicate	d on this annual report or supplement	tal annual report is	true and accu	rate and that my sign	nature shalt i required by	Chapter 607, I	Florida Stalt	ites; and that	my name ap	pears in
officer o	or director of the corporation or the re-	cepver primustae ei achmentwithen a	diress, with all	other like empowere	ad.	-		1 /		
Block 13	S OI DIDOX 13 II CHANGOO, WILCONDINA	111 42	i i				11	1 Allon		

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR