

DOCUMENT # P98000058109

1. Entity Name  
GEORGE RADA, INC.

**FILED**  
**Jan 09, 2001 8:00 am**  
**Secretary of State**

01-09-2001 90034 036 \*\*\*150.00

Principal Place of Business  
~~026 SE 9 STREET~~  
~~DEERFIELD BEACH FL 33441~~  
**19538 SPRING OAK DR.**  
**EUSTIS, FL 32726**

Mailing Address  
~~P.O. BOX 686~~  
~~FORT LAUDERDALE FL 33310~~  
**P.O. BOX 686**  
**MT. DORA, FL**  
**32757**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
**P.O. BOX 686**  
Suite, Apt. #, etc.

City & State  
**MT. DORA FL**

Zip  
**32757**

Country  
**LAKE**



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3523981**

Applied For  
☐ Not Applicable

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

6. Name and Address of Current Registered Agent  
**RADA, GEORGE**  
**2901 NW 47 TERR**  
**BLDG 4, APT #141**  
**LAUDERDALE LAKES FL 33313**

7. Name and Address of New Registered Agent  
Name **GEORGE RADA**  
Street Address (P.O. Box Number is Not Acceptable)  
**19538 SPRING OAK DR.**  
City **EUSTIS** FL Zip Code **32726**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **1-3-01**  
Signature typed or printed name of registered agent and title if applicable **GEORGE RADA** (NOTE: Registered agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE-NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
DP	<b>RADA, IRENE</b>	<b>2901 NW 47 TERR, BLDG 4, APT #141</b>	<b>LAUDERDALE LAKES FL 33313</b>	<input type="checkbox"/>
DST	<b>RADA, GEORGE</b>	<b>2901 NW 47 TERR, BLDG 4, APT #141</b>	<b>LAUDERDALE LAKES FL 33313</b>	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<b>RADA, IRENE</b>	<b>19538 SPRING OAK DR.</b>	<b>EUSTIS, FL 32726</b>	<input checked="" type="checkbox"/>
	<b>RADA, GEORGE</b>	<b>19538 SPRING OAK DR.</b>	<b>EUSTIS, FL 32726</b>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SECRETARY** **1-3-01** **(352) 735-4549**  
Signature typed or printed name of signing officer or director Date Daytime Phone #