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 DOCUMENT # P98000058326

RAPID STRIPE & TRAFFIC, INC.

FILED Apr 30, 1999 8:00 am Secretary of State 04-30-1999 90093 043 ***150.00



	· · · · · · · · · · · · · · · · · · ·							
Principal Place	of Business	Mailing Address						
2820 PARKWAY LAKELAND FL 3		2820 PARKWAY STREET LAKELAND FL 33811				DO NOT WRITE IN THIS SPACE		
	• •							
				٠		3. Date Incorporated or Qualified 06/30/1998		
2. Principal Pi	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For		
2 1		26	26			59-35 19696 Not Applicab		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional		
22		27	27			5. Certificate of Status Desired Fee Required		
City & State	e · ·	City & State				6. Election Campaign Financing \$5.00 May Be		
23	•	28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Intangible		
24	25	29	30			Personal Property Tax. Yes No		
	9. Name and Address of Curren	nt Registered Agent				10. Name and Address of New Registered Agent		
				81	Name			
	LAND, ALVIN G		<u></u>		Street Addre	ress (P.O. Box Number is Not Acceptable)		
2820 PARKWAY STREET		82 Street		Street Addit				
LAKE	ELAND FL 33811	•		83		·		
		•						
•				84	City	FL 85 Zip Code		
agent. I a	m familiar with, and accept the obligation of th	ations of, Section 607.0505, Flori	ida Stati	nes.		on's board of directors. I hereby accept the appointment as registered ad when reinstaling) OATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.		DELETE	1.1 111			☐ Change ☐ Addit		
TITLE .	PD ALVING	C perese	1					
NAME .	HOLLAND, ALVIN G		1.2 NA					
STREET ADDRESS	817 E ORANGE ST		i i		NODRESS .			
CITY-ST-ZIP	LAKELAND FL 33801	- Delete		TY-ST-	ZIP	M Change ☐ Addit		
TITLE	VD	☐ DELETE	2.1 TIT			rubbard, Connie L.		
NAME.	HUBBARD, CONNIE J		2.2 NA	ME	1 140	Jobsaid, Comme C.		
STREET ADDRESS	2820 PARKWAY ST		2.3 ST	REETA	ADDRESS	• •		
CITY-ST-ZIP	LAKELAND FL 33811		2. 4 CI	TY-ST-	- ZIP			
TITLE	STD	. DELETE	3.1 ТП	FLE		Change ☐ Addit		
NAME	SCHINDLER, ROBERT J		3.2 NA	ME				
STREET ADDRESS	2820 PARKWAY ST		33 ST	REET	ADDRESS			
CITY-ST-ZIP	LAKELAND FL 33811		3.4. CI	TY-ST	-ZIP			
TITLE	D	DELETE	4.1 TIT	ΓLE		☐ Change ☐ Addi		
NAME	DOUBERLEY, MARSHALL		4.2 N	AME				
STREET ADDRESS	2820 PARKWAY ST		4.3 ST	REET	ADORESS	• .		
CITY-ST-ZIP	LAKELAND FL 33811		4.4 CF	TY-\$T-	ZIP			
TITLE		☐ DELETE	5.1 TT	ΓLE		☐ Change ☐ Addit		
NAME] .		5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET A	ADDRESS	:		
CITY-ST-ZIP		•	5.4 CF	TY-ST-	ZIP			
TITLE		. DELETE	6.1 717	TLE		☐ Change ☐ Addit		
NAME			6.2 NA	ME				
STREET ADDRESS	·		6.3 ST	REET	ADDRESS	•		
		•	1	TY-ST-	1			
CITY-ST-ZIP	and the state information aunalised w	ith this filing does not qualify for				Section 119 07(3)(i). Florida Statutes. I further certify that the information		

I hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(f), 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 or the receiver or 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 chapter 607, on an attachment with an address, with all other like empowered.

SIGNATURE: