

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P98000069013

1. Corporation Name

RITS TRANSPORTATION COMPANY

Principal Place of Business

4501 PINE CONE PLACE  
COCOA FL 32926

Mailing Address

4501 PINE CONE PLACE  
COCOA FL 32926

FILED  
May 04, 1999 8:00 am  
Secretary of State

05-04-1999 90003 034 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/06/1998

4. FEI Number

59-3526595

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year intangible/  
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

ROBINSON, DENNIS  
4501 PINE CONE PLACE  
COCOA FL 32926

10. Name and Address of New Registered Agent

81 Name

Dennis Robinson

82 Street Address (P.O. Box Number is Not Acceptable)

707 Mullet Road

83

#106

84 City

Port Canaveral

FL

85 Zip Code

32920

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Dennis Robinson*  
Signature, typed or printed name of registered agent and title if applicable.

Dennis Robinson President 4/28/99

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME ROBINSON, DENNIS  
STREET ADDRESS 175 SEA BREEZE CIR  
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE D ☐ DELETE  
NAME ROBINSON, DONNA  
STREET ADDRESS 175 SEA BREEZE CIR  
CITY-ST-ZIP MERRITT ISLAND FL 32953

TITLE D ☒ DELETE  
NAME ROBINSON, LINDA  
STREET ADDRESS 175 SEA BREEZE CIR  
CITY-ST-ZIP MERRITT ISLAND FL 32926

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Dennis Robinson*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/99

Date

407-868-0770

Daytime Phone #

CR2E034 (1/98)