

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 # P98000105173

1. Corporation Name

RK Holdings, Inc.

Principal Place of Business

Mailing Address

8840 9th Street North
St. Petersburg, FL 33702

FILED

99 SEP 16 PM 2:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
December 18, 1998

4. FEI Number
593547662

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Sandip I. Patel
2240 Belleair Road, Suite 160
Clearwater, Florida 33764

81 Name
Mohammad Rahman

82 Street Address (P.O. Box Number is Not Acceptable)
8840 9th Street North

83
84 City
St. Petersburg FL 85 Zip Code
33702

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

SEP 10, 1999

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
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CITY-ST-ZIP

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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 D,P ☒ Change ☐ Addition
1.2 NAME Mohammad Rahman
1.3 STREET ADDRESS P.O. Box 20708
1.4 CITY-ST-ZIP St. Petersburg, Florida 33742

2.1 TITLE D,S ☒ Change ☐ Addition
2.2 NAME Hikman Rahman
2.3 STREET ADDRESS P.O. Box 20708
2.4 CITY-ST-ZIP St. Petersburg, Florida 33742

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 9000002936879--0
3.4 CITY-ST-ZIP -09/24/99-01088--011

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS ***550.00 ***550.00
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:

Signature, typed or printed name of signing officer or director

09/10/99 (727) 581-0998

Date

Daytime Phone