FILE NOW: FILING FEE AFTER MAY 1 15 \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V18160

(4)

RAD RAPID DELIVERY, INC.

FILED
Apr 23 1997 8:00am
Secretary of State



Principal Place of Business Mailing Address							84811 BHB11 (89)
-	VERSITY DRIVE	2570 N UNIVERSITY DRI	IVE				
#212		#212					
Sunfrise Fl. 33322 Us		SUNRISE FL 33322-3055 US			3. Date Incorporated or Qualified	3a. Date of La	
					03/03/1992	08/13/199) 6
_	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21			26		65-0322458		Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		00 May Be
3		28	28		Trust Fund Contribution Added to Fees		
Zip	Country	Z _i p	Count	ry	8. This corporation has liability for in	Angible tax und	er s. 199.032,
24	25	29	30			Yes No	
	9. Name and Address of Curre	nt Registered Agent		1 Name	10. Name and Address of New Reg	istered Agent	to and a contract that the same security
	AVIDSON, RICHARD]	Ivaille			
	O BRUCKNER AND BRUCKNER		82 Street Ad		ress (P.O. Box Number is Not Acceptabl	e)	
	992 N PINE ISLAND ROAD T LAUDERDALE FL 33351		8	3			
rı	I FAOREWRYTE LF 99991						7' 0 1
			8	4 City		FL B5	Zip Code
SIGNATURI	Signature, typed or printed name of registered as	gent and tile if applicable (No	OTE: Hrigistored /	\gen! signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE FRS AND DIFFEC	TORS IN 12
120555 TITLE 35 - C		DELETE	1,1 1/TL	· · · · · · · · · · · · · · · · · · ·	-()		
NAME	DAVIDSON, RICHARD		1,2 NAV	` ` @	ichard, Davidson 1570 n. university or. *		
STREET ADDRES	4666 AT BILLE IOLAND DD		1.3 \$TR	E1 ADDRESS	1570 N. UNIVERSITY DR. 7	1212	
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY	-ST-ZIP	SUNRISE PL 33322		
TITLE		DELETE	2.1 TITL			☐ Cha	nge 🔲 Addition
NAME			2.2 NAM	HE			
STREET ADDRES	ss			EET ADDRESS			
CITY-ST-ZIP		DELETE		r-ST-ZIP		Cha	nge Addition
TITLE NAME			3 1 THL 3.2 NAM			LJ GIIA	ngo <u>L</u> Audilloli
STREET ADDRES	22			ET ADDRESS			,
CITY-ST-ZIP				Y-S1-ZIP			
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NAME			4. 2 NA	AE			
STREET ADDRES	SS S		4.3 STR	EET ADDRESS			
CITY-ST-ZIP		E.A		-ST-ZIP		(m) (m)	
TITLE		[] DELETE	5.1 T(TL	į		Cha	nge 🔲 Addition
NAME			5.2 NAN	1			
STREET ADDRES	SS			EFT ADDRESS			
CITY-ST-ZIP		DELETE		-S1-ZIP		Cha	nge Addition
TITLE		LI DULLETE	6.1 T/1L			∟ cua	inge LJ ADUITION
NAME CONTEX ADDRES			6.2 NAN				
STREET ADDRES	»»			EET ADDRESS			

1. I do 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 or Block 12 or Block 13 or Block 13 or Block 13 or Block 13 or Block 14 or Block 14 or Block 15 or Block 15 or Block 15 or Block 15 or Block 16 or Block 16 or Block 16 or Block 17 or Block 18 or Block 18 or Block 18 or Block 19 or Block