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

**PROFIT** CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V18160

RAD RAPID DELIVERY, INC.

(4)

## **FILED** May 04 1998 8:00am Secretary of State



						-{		HL 186 (13)
Principal Place	e of Business	Mailing Address					4.2 4.4 4.4 6.	
2570 N UNIVE	rsity drive	2570 N UNIVERSITY DRIVE				1		
#212	MAAA	#212				DO NOT WRITE IN THIS SPACE		
SUNRISE FL <b>3332</b> SUNRISE FL 3332 US US						3. Date Incorporated or Qualified		
	and the second	•				03/03/1992		
	isce of Suninees	2s. Mailing Address				4, FEI Number		Applied For
		26				65-0322458	<del></del>	Not Applicable
Suite, Act.	e, elc.	Suite, Apt. #, etc.		_			60.75	Additional
3		27				5. Certificate of Status Desired	7	Required
Ony & State	Marin grade	City & State				6, Election Campaign Financing	\$5.0	O May Be
	<u></u>	28				Trust Fund Contribution		d to Fees
	Country	Zip	Countr	у		8. This corporation owes or has paid to	he current year I	ntangible
	29		30			Personal Property Tax due June 30. Yes No		
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Regist	ered Agent	
The state of the s	MISSON, FIICHARD		81	'  ¹	Name			
	BRUCKNER AND BRUCKNER		82	2 5	Street Addre	ess (P.O. Box Number is Not Acceptable)		
	N PINE ISLAND ROAD							
77	LAUDERDALE FL 33351		83	3				
1 may 1 mg 1 m			84	1 7	City		85 Zi	p Code
	A STATE OF THE STA		1-	7	-		FL ) )	1
SIGNATURE	Signature, typed or printed name of registered ages	t and title if <b>applicable</b> (NO					DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICER		
TITLE	PD	☐ DELETE	1.1 TITLE				Change	Addition
NAME	DAVIDSON, RICHARD		1.2 NAME		ì			
STREET ADDRESS	2570 N UNIVERSITY DR #212		1.3 STREE	ET AD	ORESS			
CITY-ST-ZIP	SUNRISE FL		1.4 CITY -		ZIP			
TITLE		DELETE	2.1 TITLE		1		L. Change	e L Addition
NAME			22 NAME					
STREET ADORESS			2.3 STREE	ET AD	ORESS			}
CMY-ST-ZIP		1 1 500 500	2, 4 CITY		ZIP		· .	T A A AVE
THLE		DELETE	3.1 TITLE		Ì		L Change	e 🗀 Addition
NAME			3.2 NAME					ĺ
STREET ADDRESS			3.3 STREE					
CITY-ST-ZIP		Drifte	3.4. CITY		ZIP		Change	e Addition
TITLE		DELETE	4.1 TITLE				∟j Unang	· LT WOODON
NAME			4. 2 NAM					ļ
STREET ADDRESS			4.3 STREE					
CITY-ST-ZIP		DELETE	4.4 CITY -		ZIP		Chano	e Addition
TITLE		□ preceit	5.1 TITLE 5.2 NAME		1		L. Olding	C
NAME CYDEET ADDRESS					voece			
STREET ADDRESS			5.3 STREE		1			ľ
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - 6.1 TITLE		ZIF		Chang	e Addition
NAME		C precit	62 NAME		1		mi awara	
1			6.3 STREE		AUBE 66			
STREET ADDRESS				EI AL				

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.

SIGNATURE: Ruhard Danielson & Collins

4-27-98 954 378 5272