

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

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90096 010 ***150.00

DOCUMENT # L26861

1. Corporation Name ROSEMEAD REDWOOD FLORIDA, INC.

Principal Place of Business: ROSEMEAD REDWOOD FLORIDA, 9608 SW 117TH AVE, MIAMI FL 33186, US. Mailing Address: ROSEMEAD REDWOOD FLORIDA, 9608 SW 117TH AVE, MIAMI FL 33186, US.



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/01/1989. 4. FEI Number: 65-0172198. 5. Certificate of Status Desired: \$8.75 Additional Fee Required. 6. Election Campaign Financing: \$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 (21-23) and Mailing Address (24-30) fields.

9. Name and Address of Current Registered Agent: HERBERTO C BETHENCOURT, 9608 SW 117TH AVE, MIAMI FL 33186. 10. Name and Address of New Registered Agent (81-84).

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: _____ DATE: _____ (NOTE: Registered Agent signature required when reinstating)

Table with 2 main columns: 12. OFFICERS AND DIRECTORS and 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for Title, Name, Street Address, 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] 4-29-99 Date Daytime Phone #

Vertical text on the right edge: CR2E034 (11/98)