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 # M80341

(4)

RED'S AND SONS ENTERPRISES INC.

Principal Place of Business Mailing Address	

FILED Feb 11 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					Transfer in the later with a later with	åte minger namet nemet minte brites ifft.
1701 16TH STREET SOUTH ST. PETERSBURG FL 33705		1701 16TH STREET SOUT				
SI. PETERSE	ONG PL 33705	ST. PETERSBURG FL 337	rus		DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualified	
					05/06/1988	
—	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2958538	Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.		5. Certificate of Status Desired	S8.75 Additional	
City & Stat	10	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	
Zip	Country	Zφ	Country		8. This corporation owes or has paid t	
24	25	29	30		Personal Property Tax due June 30	
L	Name and Address of Currer	nt Registered Agent			10. Name and Address of New Regis	tered Agent
1	RGUSON, CARL A		81 1	Name		
1	01 16TH STREET SOUTH		82 5	Street Add	ress (P.O. Box Number is Not Acceptable)	
ST	. PETERSBURG FL 33705		83			
			63			
			84	City		FI 85 Zip Code
11. Pursuant	to the provisions of Sections 607,050	12 and 607 1508, Florida Statuti	es, the above-n	amed corp	poration submits this statement for the purp	
l office or a	registered agent, or both, in the State im familiar with, and Accept∕the oblid	⊧ of Florida. Such change was a ations of, Section 607,0505, Fic	authorized by th orida Statutes.	ne corporal	poration submits this statement for the purp tion's board of directors. I hereby accept the	ne appointment as registered
SIGNATURE	Signature, typed in printed have of the stight age	400				7/2/98
L	Signature, typed or printed name of tripole of age	of and the diar plicable (NOT)		ignature requi		DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	
TATLE	DP	☐ DELETE	11 TITLE			☐ Change ☐ Addition
NAME	FERGUSON, CARL A		1.2 NAME			
STREET ADDRESS	3720 17TH AVE. SO.		1.3 STREET AD	·		
CITY-ST-ZIP	ST. PETERSBURG FL DT	DELETE	1.4 CITY-ST-2 2.1 TITLE	<u> </u>	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	GREEN, BRIDGET	[] Office it		İ		C cuanda C vocuon
STREET ADDRESS	1228 ASTERIA WAY SOUTH		2.2 NAME 2.3 STREET AD	oncee		
CITY-ST-ZIP	ST. PETERSBURG FL 33712		2.4 CITY - ST - 2		•	.,
TITLE	D D	DELETE	3.1 TITLE	OF _		Change Addition
NAME	FERGUSON, CARLA D		3.2 NAME			- and - months
STREET ADDRESS	2912 46TH AVE. S.		3.3 STREET AD	DRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		3.4. CITY-ST-7	- 1		
TITLE	D	DELFTE	4.1 TITLE			☐ Change ☐ Addition
NAME	SMITH, ANTHONY		4. 2 NAME			•
STREET ADDRESS	2521 CASILLA WAY SOUTH		4.3 STREET ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL 33712		4.4 CITY-ST-Z	1		
TITLE	TS	DECETE	5.1 TITLE			☐ Change ☐ Addition
NAME	CLARK-FERGUSON, CYNTHIA	4	5.2 NAME			-
STREET ADDRESS	3720-17TH AVE SO		5.3 STREET ADI	DRESS		
CITY-ST-ZIP	ST. PETERSBURG FL		5.4 CITY - ST - Z	NP		
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME	ľ		
STREET ADDRESS			6.3 STREET ADI	DRESS		

14. Thereby 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 coefver 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 charged, or on an appear with an address.