

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 APPROVED AND FILED

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1995 MAR 14 PH 12:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P33820 (2)

1. Corporation Name
REDHILL, INC.

800001430718
-03/15/95--01096--004
****200.00 ****200.00

Principal Place of Business Mailing Address
2300 TALL PINES DRIVE, SUITE 123 2300 TALL PINES DRIVE, SUITE 123
LARGO FL 34641-5319 LARGO FL 34641-5319

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/03/1991 3a. Date of Last Report 03/11/1994

4. FEI Number 59-3005855 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 has liability for intangible tax under S. 199.032, Florida Statutes 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 28 Zip Country 29 Country 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERTZBERG, TODD F.
1013 MAGNOLIA BLVD.
CLEARWATER FL 34616

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition

TITLE P
NAME TERAS, ILKKA
STREET ADDRESS 2300 TALL PINES DR. #123
CITY - ST - ZIP LARGO FL 34641

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE COTB
NAME PERTTI, SIMOVAARA
STREET ADDRESS P.O. BOX 88 (ORNINKATU 11)
CITY - ST - ZIP SALO, FINLAND SF-24101 FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE ST
NAME ZAMBORINI, AYSIN
STREET ADDRESS 2300 TALL PINES DR. #120
CITY - ST - ZIP LARGO FL 34641

3.1 TITLE TREASURER Change Addition
3.2 NAME CONNIE PHILLIPS
3.3 STREET ADDRESS 2300 TALL PINES DR. #120
3.4 CITY - ST - ZIP LARGO, FL 34641

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE SECRETARY Change Addition
4.2 NAME JENNY DANK
4.3 STREET ADDRESS 2300 TALL PINES DR. #123
4.4 CITY - ST - ZIP LARGO FL 34641

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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:

Ilkka A Teras
ILKKA A TERAS 3/7/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Title

8/3 - 596-5573