FILED Apr 30, 1999 8:00 am Secretary of State

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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

DOCO	MEN! # P95000)082145			İ		
1. Corporatio	RED AUTOMATION SYSTEM						
אותוטה	DED MOTORIMITOR STOTER					au kāriā kilai riāki ?	11 16 1 1 121 1 11 1
Principal Place of Business Mailing Address					1 (86)(80) (48 (8))) 8)(1 69)(1 68)(1 83)(1 83)	#! I#!I# I!##! JI#I! I	11881 #111 1881
3818 40TH ST. 3818 40TH ST.					ŧ		
TAMPA FL 33610 TAMPA FL 33610					DO NOT WRITE IN TH	IS SPACE	
	•				3. Date Incorporated or Qualifed		
					10/26/1995		
Principal Place of Business Za. Mailing Address					4. FEI Number	Apr	plied For
21 26					59-3344254		t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A	
22 27 City 8 State						Fee Rec	<u></u>
City & State City & State					6. Election Campaign Financing Trust Fund Contribution	\$5.00 i Added to	. ,
Zip			Country		8. This corporation owes the current year le		71 603
24	25 29 30		-		Personal Property Tax.		□No
	9. Name and Address of Currer				10. Name and Address of New Registere	d Agent	
CDE	NOW DONALD E ID		81	Name			}
FRENCH, DONALD E JR			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
116 MITCHELL DR BRANDON FL 33511				ļ <u>.</u>			
אחט	HDON FE 335 [1		83	!	·		
			84	City	F	85 Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,				named cor			registered
office or r	egistered agent, or both, in the State	of Florida. Such change was aut	horized by	the corporati	ion's board of directors. I hereby accept the app	ointment as reg	istered
•	m familiar with, and accept the obliga	itions of, Section 607,0505, Florid	ia Statutes	-			.
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: R	egistered Ager	nt signature require	ed when reinstating) DATE		— <u> </u>
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	
TITLE	D ·	☐ DELETE	1.1 TITLE			Change	Addition)
NAME	FRENCH, DONALD E JR		1.2 NAME				
STREET ADDRESS	116 MITCHELL DR.		1.3 STREET ADDRESS				}
CITY-ST-ZIP	BRANDON FL 33511	☐ DELETE	1.4 CITY-ST-ZIP			☐ Change	Addition
im.E	D EDENICH DONALD E CD	F. DEFEIG	2.1 TITLE 2.2 NAME			□ ouguge	D. vaguran)
NAME STREET ADDRESS	FRENCH, DONALD E SR 13020 FAIR GREEN DR		2.3 STREET ADDRESS				
CITY-ST-ZIP	RIVERVIEW FL 33569		2.4 CITY-ST-ZIP				}
TITLE .	1012111211121112	☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				ĺ
STREET ADDRESS			3.3 STREET ADDRES				{
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS	rs		4.3 STREET ADDRESS				ĺ
CITY-ST-ZIP		☐ DELETE	4.4 CITY-ST-ZIP			[] Change	Addition
TITLE		Ct Nerest	5.1 TITLE 5.2 NAME			- C1 Guarda	
NAME STREET ADDRESS			5.3 STREET	ADDRESS			ļ
CITY-ST-ZIP			5.4 CITY-S				ļ
TITLE			6.1 TITLE			Change	Addition
NAME			6.2 NAME	{			ļ

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

4.27.99

813621 8257 Daytime Phone #