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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

FILED

May 04 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000024060 (1)

RED DAWG ENTERPRISES, INC.

925 COUNTRY CLUB BOULEVARD SUITE 1		925 COUNTRY CLUB BOULEVARD SUITE 1		DO NOT HISTORY AT THE	200405
CAPE CORAL FL 33990		CAPE CORAL FL 33990		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
				· ·	
A Detection D	and of Discipance	On Mailing Address		03/18/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		65-0643589	Not Applicable
22		27		5. Certificate of Status Desired See Required Fee Required	
City & State	•	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	-
24	9. Name and Address of Curre	29	30	Personal Property Tax due June 30. 10, Name and Address of New Registered	Yes No
		in negistered Agent	81 Name	10. Italie alle Address of New Indistriet	/ Agent
METEN, A. NOCLE					
	COUNTRY CLUB BOULEVARD)	82 Street Ac	ddress (P.O. Box Number is Not Acceptable)	
	TE 1		83		
CAI	PE CORAL FL 33990		85		
			84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-pamed 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 sufficiently provided by the corporation's board of directors. Thereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 607.0505 It lightes.					
SIGNATURE	Signature, typed or printed name of registered at	pent and lifte if applicable (NOTE: Augistered Agent signature ro	optired when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PT .	☐ DELETE	1.1 TITLE		Change Addition
NAME	MEYER, A. NOELE		1.2 NAME		
STREET ADDRESS	2213 N.E. 13TH PLACE		1.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL 33909		1.4 City-St-ZiP		
TITLE	VS	DELETE	2.1 TITLE		Change Addition
NAME	ME YER, JOHN W		2.2 NAME		
STREET ADDRESS	2213 N.E. 13TH PLACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL 33909		2. 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		[] DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAMÉ		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T	4.4 CITY-ST-ZIP		
TITLE		☐ DELET e	5.1 TITLE		Change Addition
NAME [5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		T Atlete	5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	antifust at a land information and the state of	Cat. this fitting discussion and a second	6.4 C/TY - ST - Z/P	in Continue and OZIOVE) Florida Continue (1)	and the state of t
14. I hereby certify that the information supplied with this filling 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 eath; 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.					