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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # K87214

(8)

REDTWO, CORP.

Principal Place of Business

SIGNATURE:

% JOSE PICO

8601 SW 75 ST

**MIAMI FL 33143** 

Mailing Address % JOSE PICO 9601 SW 75 ST MIAMI FL 33143-3754 FILED

JAN 27 PH 2: 34

SECRETARY OF STATE TALLAHASSEE, FLORIDA

3. Date Incorporated or Qualified

05/09/1989



3a. Date of Last Report 04/12/1996

2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	<del></del>	plied For		
21		26				65-0116369		t Applicable		
Suite, Apt.	#, etc.	Suite, Apt #, etc	).			5. Certificate of Status Desired	\$8.75 A Fee Re			
City & State	0	City & State				6. Election Campaign Financing	\$5.00	May Be		
23 28				Trust Fund Contribution		Added to Fees				
Zip	Country Zip Col		Country		8. This corporation has liability for intangible	e tay under s.	199.032			
24 25 29 30				Florida Statutes Yes No						
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered							Agent			
PICO, JOSE				61	Name					
8601 SW 75 ST					82 Street Address (P.O. Box Number is Not Acceptable)					
MIAI	MI FL 33143									
					83					
				84			10F 7.5 /	Code		
				04	City	FI	<b>85</b> Zip (	20de		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab					-named corpo	pration submits this statement for the purpose	of changing it	s registered		
office or r	egistered agent, or both, in-	the State of Florida. Such change the obligations of, Section 607.050	was authorizer 15. Florida Stat	d by	the corporation	on's board of directors. I hereby accept the ap	pointment as	registered		
_ ~	in the man with, pire accept	the obligations of pooles of societies	20, 1 101100 0101		•					
SIGNATURE	Signature, typing or printed name of re-	igiden, a agest and title if applicable.	(NOTE Registered	d Age	nt signature require	d when reinstating) DATE				
12.	OFFIC	CERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	S IN 12		
TITLE	D	DELET	E 1.1 TI	TLE			Change	Addition		
NAME			AME	1	nonnangangi		1			
STREET ADDRESS	DDRESS 8801 SW 75 ST			1.3 STREET ADDRESS		-01/27/9703	)TOT4=-(	)21 🔭 -		
CITY - S* - ZIP	MIAMI FL		1.4 C)	ITY-S	T-71P	****173.75°	****1	/3.75		
TOTLE		☐ DELET					Change	Addition		
NAME		_	2.2 N/	AME						
STREET ADDRESS					ADDRESS					
CITY - ST-ZIP					ST-ZIP		,			
TITLE		DELET			21-20		Change	Addition		
NAME		<del></del>	3.2 N			12/10				
STREET ADORESS					ADDRESS	mwp				
					ST-ZIP					
CITY-ST-ZIP TITLE		DELET			21 - ZIF		Change	Addition		
NAME			4.25				man or one of a			
			1 -		ADDRESS					
STREET ADDRESS					T-ZIP					
CITY-ST-ZIF TITLE		DELET			or-ZIP		Change	Addition		
		L.J VCCL	52 N				S.iu.igo			
NAME STOCKT ADODESS					ADDRESS					
STREET ADDRESS										
CITY-ST-7/P		DELET		IIY-S	1-214		Change	Addition		
TIBLE		ר"ו הנונו					m numbe	Admitoir		
NAME			62 N							
STREET ADDRESS					ADDRESS					
CITY - S1 - 7IP		and and the state of the state			II-ZIP	in Contine 140 07(2)(i) Etopide Ctet ton 14 dil	or partification	tho		
14. I do here informatio	by certify that the information indicated on this annual.	ri suppi-ed with this filing does not eport or supplemental annual repo	guality for the ort is true and a	exe accu	imption stated urate and that	in Section 119.07(3)(i), Florida Statutes. I furthmy signature shall have the same legal effect	as if made un	ider oath; thai		
t am an c	officer or director of the orp	oution or the receiver or trustee e	mpowered to	ехес	cute this report	t as required by Chapter 607, Florida Statutes;	and that my r	name		
t am an officer or clinector of the opporation 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 it shanglid, or on an attachment with an address.										