**FILED** 

Mar 01, 1999 8:00 am Secretary of State

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. J. HARBERT I BER JURKE KARAT KEREK KIDIK EKAN EKEN BIRAK BIRAK DIRAK BERIK DIRAK BIRAK BIRAK BIRAK BIRAK ATRA

## 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

## **DOCUMENT # K87214**

1. Corporation Name

REDTWO, CORP.

							<u> </u>
Principal Place	of Business	Mailing Address	_		i immigrit, ann i mire chang com com ann		0.0
% JOSE PICO 8601 SW 75 ST MIAMI FL 33143		% JOSE PICO 8601 SW 75 ST MIAMI FL 33143	8601 SW 75 ST		DO NOT WRITE IN	THIS SPACE	
MIPHOLIC SOLITO	•			-	3. Date Incorporated or Qualifed 05/09/1989		
Principal Place of Business     2a. Mailing Address     26					4. FEI Number 65-0116369	\\	pplied For lot Applicable
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #		Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country 25	Zip 29 30	Country		This corporation owes the current yes     Personal Property Tax.	ear Intangible	MNo
24		of Current Registered Agent	1——		10. Name and Address of New Regis	tered Agent	<del></del>
	o. Name and Address (	or content (togics or right)	81	Name			
PICO, JOSE 8601 SW 75 ST			82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	MI FL 33143		83				
			84	City		FL 85 Zip	Code
SIGNATURE	Signature, typed or printed name of re	the obligations of, Section 607.0505, Floridangistered agent and title if applicable. (NOTE: Re- CERS AND DIRECTORS			ad when reinstating)  ADDITIONS/CHANGES TO OFFICE		
TITLE	D	☐ DELETE	1.1 TITLE		•	☐ Change	Addition
NAME	PICO, JOSE		1.2 NAME				]
STREET ADDRESS	8601 SW 75 ST		1.3 STREET	ADORESS			ļ
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST	r-ZIP			
TITLE		☐ DELETE	2.1 TITLE			☐ Change	e 🗌 Addition
NAME			2.2 NAME		·		ļ
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY-ST-ZIP			2.4 CITY-S	T-ZIP			
TITLE		□ ĐELETE	3.1 TITLE		-·	: Change	Addition (
NAME			3.2 NAME			•	
STREET ADORESS			3.3 STREET				
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S	T-ZIP		☐ Change	e ☐ Addition
TITLE			4.2 NAME				
NAME			4.3 STREET	T ADDRESS			
STREET ADDRESS			4.4 CITY-S	ì			ļ
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE			☐ Change	e Addition
NAME.			5.2 NAME	ļ			į
STREET ADDRESS			5.3 STREE	T ADDRESS			}
CITY-ST-ZIP			5.4 CITY-S	T-ZIP	<del></del>		
TITLE		☐ DELETE	6.1 TITLE			☐ Change	e 🛄 Addition
	1		COMME	1			

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 of suppliemental 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 of the Tyceiver 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 man another with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP