## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 30, 2004 8:00 am Secretary of State 04-30-2004 90288 033 \*\*\*150.00

DOCUMENT # K87214  1. Entity Name REDTWO, CORP.			04-30-20	04 90288 0 <b>33</b> ****130.00
Principal Place of Business	Mailing Address		· ·	
% IOSE PICO				
8601 SW 75 ST MIAMI, FL 33143	#382 MIAMI, FL 33173			
·				
2. Principal Place of Business 2238 W 3 AVE	2238 W 3 Ave			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		04222004 Chg-P	CR2E034 (10/03)
City & State HIGWAH FLORIDA	City & State		4. FEI Number 65-0116369	Applied For Not Applicable
Zip Country	Zip	Country	5. Certificate of Status Desired	S8.75 Additional Fee Required
33010 6. Name and Address of Current I	Registered Agent	<u> </u>	7. Name and Address of New R	· · · · · · · · · · · · · · · · · · ·
		Name	Jose Pico	
PICO, JOSE 8601 SW 75 ST	•	Street Address		)
MIAMI, FL 33143			(P.O. Box Number is Not Acceptable	ave.
		City Hi	tleat	FL Zip Code
8. The above named entity subprils this statement to	r the purpose of changing its			rida. I am familiar with, and accept
the obligations of registered agent.		Tosa	71°	· •
SIGNATURE		JUSE	<u> </u>	4-26-2004
Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent signature requir	ed when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.0	9. Election Campa Trust Fund Con		5.00 May Be ided to Fees	
10. * OFFICERS AND	DIRECTORS	11.	ADDITIONS/CHANGES TO OFF	
TITLE D	Delete	TITLE NAME	8770 S.W. 72 S	CO ⊠ Change ☐ Addition L. #3.8.2
NAME PICO, JOSE STREET ADDRESS 8601 SW 75 ST		STREET ADDRESS	Miami, FL 33	
CITY-ST-ZEP MIAMI, FL		CITY-ST-ZIP		·
TITLE	☐ Delete	TITLE		☐ Change ☐ Addition
NAME		NAME		
STREET ADDRESS CITY-ST-ZIP		STREET ADDRESS CITY-ST-ZIP		
TITLE	Delete	TITLE		☐ Change ☐ Addition
NAME	0000	NAME		
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CITY-ST-ZIP		Choose Addition
TITLE NAME	☐ Delete	TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS		
CITY-ST-ZIP		CETY-ST-ZIP		
TITLE	☐ Delete	TITLE		☐ Change ☐ Addition
NAME CTREET ADODGES		NAME STREET ADDRESS		
STREET ADDRESS ) CITY-ST-ZIP		CITY-ST-ZIP		
TITLE	☐ Delete	TITLE		Change Addition
NAME		NAME		:
STREET ADDRESS		STREET ADDRESS CITY-ST-ZIP		
CITY-ST-ZIP	h this filing does not qualify t		Section 119 07/3)(i) Florida Statutes	I further certify that the information
12. I hereby certify that the information supplied wit indicated on this report or supplemental report of the corporation or the receiver of trustee emphasized or the receiver of trustee emphasized or on an attachment with a factorese.	is true and accurate and that	t my signature shall have the	ne same legal effect as if made under	oath; that I am an officer or director ne appears in Block 10 or Block 11 if
of the corporation of the receiver of truster employed changed, or on an attachment with a laboress.	with all other like empowere	d. C	A. K.	
		Jose Kic	11 1 1 1 1 1	305-595-1267
SIGNATURE:	DENTED NAME OF SIGNING OFFICE		Date	Daytime Phone #