

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

FILED  
May 06 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **383495** (9)  
1. Corporation Name  
**RED E ENTERPRISES, INC.**



Principal Place of Business <b>P.O. BOX 587 BETWEEN MILE MARKERS 99 AND 100 KEY LARGO FL 33037</b>	Mailing Address <b>P.O. BOX 587 BETWEEN MILE MARKERS 99 AND 100 KEY LARGO FL 33037</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified <b>06/08/1971</b>	
21		26		4. FEI Number <b>59-1352146</b>	
22		27		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
24		29		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**REDDY, V.C.  
130 POINT PLEASANT DRIVE  
P. O. BOX 587  
KEY LARGO FL 33037**

81 Name	<b>REDDY, JOHN C.</b>
82 Street Address (P.O. Box Number is Not Acceptable)	<b>130 POINT PLEASANT DR.</b>
83	<b>P.O. BOX 587</b>
84 City	<b>KEY LARGO</b>
85 Zip Code	<b>FL 33037</b>

11. Pursuant to the provisions of Sections 607.0502 and 607.1505, Florida Statutes, the above-named 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 authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when reinstating)

DATE

*John C. Reddy*  
4-20-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>REDDY, JOHN C</b>	1.2 NAME	<b>REDDY, JOHN C.</b>
STREET ADDRESS	<b>4308 TIMBALIER DR</b>	1.3 STREET ADDRESS	<b>130 POINT PLEASANT DR.</b>
CITY-ST-ZIP	<b>COLUMBIS GA</b>	1.4 CITY-ST-ZIP	<b>KEY LARGO, FL. 33037</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>REDDY, PATRICK J</b>	2.2 NAME	<b>VICE PRESIDENT</b>
STREET ADDRESS	<b>3578 FOSTER RIDGE RD</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CARMEL IND</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>REDDY, ANN E</b>	3.2 NAME	
STREET ADDRESS	<b>3578 FOSTER RIDGE RD</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CARMEL IN</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>REDDY, BARRY</b>	4.2 NAME	
STREET ADDRESS	<b>130 PT PLEASANT DR</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>KEY LARGO, FL 00000</b>	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>REDDY, PAMELA</b>	5.2 NAME	<b>SECRETARY</b>
STREET ADDRESS	<b>43085 TIMBALIER DR.</b>	5.3 STREET ADDRESS	<b>REDDY, DANIELA</b>
CITY-ST-ZIP	<b>COLUMBUS, G</b>	5.4 CITY-ST-ZIP	<b>130 POINT PLEASANT DR.</b>
TITLE	<input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>REDDY, VC</b>	6.2 NAME	
STREET ADDRESS	<b>130 PT PLEASANT DR</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>KEY LARGO, FL 00000</b>	6.4 CITY-ST-ZIP	

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 in an attachment with an address.

SIGNATURE:

*John C. Reddy*

4-20-98 305-451-1973

CP2E034 (10/97)