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

Mailing Address

P.O. BOX 587

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 383495

RED E ENTERPRISES, INC.

Principal Place of Business

P.O. BOX 587

FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90132 005 \*\*\*150.00



BETWEEN MILE MARKERS 99 AND 100 KEY LARGO FL 33037		BETWEEN MILE MARKERS 99 AND 100 KEY LARGO FL 33037		DO NOT WRITE IN THIS SPACE			
NET EN100 TE	. 43647	1121 21100 12 0000.			3. Date Incorporated or Qualifed		
					06/08/1971		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	<del>i —</del>	Applied For	
21		26		59-1352146		Not Applicable	
Suite, Apt. #; etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired	T	Additional Required	
22		City & State			a Clark Carrier Fire size	<del></del>	<u> </u>
City & State		28		6. Election Campaign Financing  Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zip					8. This corporation owes the current		
24	25	29 30 .			Personal Property Tax. Yes No		
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
			81	Name	TOHN C. REDDY		
	DY,V.C.		82	Street A	ddress (P.O. Box Number is Not Acceptable	)	
	POINT PLEASANT DRIVE						
	. BOX 587 LARGO FL 33037		83				
NEI	LANGO FL 33037		84	City		85 Zi	p Code
						FL   "	ite registered
11. Pursuant office or r	to the provisions of Sections 607.050 egistered agent or both, in the State	2 and 50 1508. Florida Statutes, of Bloridal Such change was auth	the above orized by	e-named c the corpor	orporation submits this statement for the pur ation's board of directors. I hereby accept th	pose of changing le appointment as	registered
agent. I a	th familiar with and accept the obliga	tions of Section 607 0505, Florida	a Statutes	•		4-27-	99
SIGNATURE	Signatur, typed or printed name of registered ager	of and title if applicable ANOTE Re	wistered Anen	t signature rec	quired when reinstating)	DATE	<u> </u>
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12
TITLE	P/	☐ DELETE	1.1 TITLE 1.2 NAME			☐ Chang	e Addition
NAME	REDDY, JOHN C	$\vee$					
STREET ADDRESS	130 POINT PLEASANT DR		1.3 STREET	ADDRESS			
CITY-ST-ZIP	KEY LARGO FL 33037		1,4 CITY-5	Γ-ZIP			
TITLE	V .	☐ DELETE	2.1 TITLE			☐ Chang	e 🔲 Addition
NAME	REDDY, PATRICK J		2.2 NAME				1
STREET ADDRESS	3578 FOSTER RIDGE RD		2.3 STREET	ADORESS			
CITY-ST-ZIP	CARMEL IND		2. 4 CITY-ST-ZIP			Choose	e Addition
TITLE	D	☐ DELETE	3.1 TITLE			☐ Chang	e [] Addition
NAME	REDDY, ANN E		3.2 NAME				į
STREET ADDRESS			3.3 STREET				
CITY-ST-ZIP	CARMEL IN		3.4. CITY-ST-ZIP			[XChang	e Addition
TITLE	S	C) DECEIE	4.1 TITLE		5/D PAMELA J. REDDY	Ephang	, A. C.
NAME	REDDY, P		4.2 NAME		FAMELA J. 110007		
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP	KEY LARGO FL 33037	<b>⊠</b> DELETE	4.4 CITY-ST-ZIP 5.1 TITLE			☐ Chang	e Addition
TITLE	DEDOV DAMELA	, better	5.2 NAME				_
NAME STREET ADDRESS	REDDY, PAMELA 43085 TIMBALIER DR.		5.3 STREET	ADDRESS			j
	S 73003 HWIDAULH DIT.		5.4 CITY-S	i			į
CITY-ST-ZIP	COLUMBOO, G	☐ DELETE	6.1 TITLE			Chang	e 🔲 Addition
NAME		_	6.2 NAME				ł

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 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 or the receiver or mustee emplowered 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP