## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

Electronic Signature of Registered Agent

**DOCUMENT# 544791** 

Entity Name: THE REDEVOO CORPORATION

FILED Feb 01, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of I	New Principal Place of Business:	
11098 BISCAYNE BLVD, SUITE 103 MIAMI, FL 33161				
Current Mailing Address:	:	New Mailing Address:		
11098 BISCAYNE BLVD, SUITE 103 MIAMI, FL 33161				
FEI Number: 59-1817645	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:		Name and Address of N	Name and Address of New Registered Agent:	
SINKLE KOLSKY, DEBRA 11098 BISCAYNE BLVD, SUITE 103 MIAMI, FL 33161 US				
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.				

Election Campaign Financing Trust Fund Contribution ( ).

SIGNATURE:

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: COBD ( ) Delete Title: COBD (X) Change ( ) Addition Name: KOLSKY, ALLAN, Name: KOLSKY, ALLAN, 1175 NE 125TH STREET # 103 Address: 11098 BISCAYNE BLVD. # 103 Address: City-St-Zip: NORTH MIAMI, FL 33161 City-St-Zip: NORTH MIAMI, FL 33161 Title: () Delete Title: (X) Change ( ) Addition KOLSKY, DEBRA SINKLE Name: KOLSKY, DEBRA SINKLE Name:

Name: KOLSKY, DEBRA SINKLE

Address: 1175 NE 125TH STREET # 103

City-St-Zip: NORTH MIAMI, FL 33161

Title: TD () Delete

KOLSKY, DEBRA SINKLE

Address: 11098 BISCAYNE BLVD. # 103

City-St-Zip: NORTH MIAMI, FL 33161

Title: TD (X) Chappe () Additional City St-Zip: TD (X) Chappe () A

Title: ( ) Delete Title: (X) Change ( ) Addition Name: KOLSKY, DEBRA SINKLE Name: KOLSKY, DEBRA SINKLE 1175 NE 125TH STREET # 103 Address: 11098 BISCAYNE BLVD. # 103 Address: City-St-Zip: NORTH MIAMI, FL 33161 City-St-Zip: NORTH MIAMI, FL 33161

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA SINKLE KOLSKY P 02/01/2008