## **2008 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # F07000000329** 1. Entity Name RED INVESTMENTS USA CORP. Principal Place of Business Mailing Address **SERRANIA A-24 106 SATSUMA DRIVE** ALTAMONTE SPRINGS, FL 32714 **GARDEN HILLS** GUAYNABO, PUETO RICO, 00966 DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent CUELLO, CARMEN G 106 SATSUMA DRIVE ALTAMONTE SPRINGS, FL 32714

**FILED** Mar 20, 2008 08:00 Al **Secretary of State** 



| DO NOT WRITE IN THIS SPACE                       |   |  |                        | [   | ]                       |                                    |                           |  |
|--|---|--|------------------------|---|-------------------------|------------------------------------|---------------------------|--|
|  |   |  |                        | 02292008                                  | No Chg-P                | CR2E034 (                          | 11/05)                    |  |
| DO NOT WRITE IN THIS SPA                         |   |  | ∪ <b>⊑</b>             | 4. FEI Number                             |                         |                                    | Applied For               |  |
|  |   |  |                        | 66-0646                                   | 6666                    |                                    | Not Applicable            |  |
|  |   |  |                        | 5. Certificate of                         | of Status Desired       |                                    | 75 Additional<br>Required |  |
| **********                                       | 6. Name and Address of Current Regis  | tered Agent  |                        |   |                         |                                    |                           |  |
| CUELLO, CARMEN G                                 |   |  | DO NOT WRITE           |   |                         |                                    |                           |  |
| 106 SATSUMA DRIVE<br>ALTAMONTE SPRINGS, FL 32714 |   |  | IN THIS SPACE          |   |                         |                                    |                           |  |
|  |   |  |                        | 114 1                                     | MIQ OF                  | ACL                                |                           |  |
|  | named entity submits this statement for the pions of registered agent.              | ourpose of changing its registere                    | ed office or regis     | tered agent, or both                      | n, in the State of Flo  | rida. I am famil                   | iar with, and accept      |  |
| SIGNATURE_                                       | Signature, typed or printed name of registered agent and title                      | f applicable. (NOTE, Registere                       | d Agent signatura requ | ared when reinstating)                    |                         | DATE                               |                           |  |
|  | E NOWIII FEE IS \$150.00<br>ay 1, 2008 Fee will be \$550.00                         | Election Campaign Finar     Trust Fund Contribution. |                        | 5.00 May Be<br>dded to Fees               | م في د                  | 214 1 262 1                        |                           |  |
| 10.  | OFFICERS AND DIREC  | CTORS .  | 100 k 600,40           | 160 % C 3/L 1                             | Light of the Control of | <del>and a later</del>             | ET FARES STATE            |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP            | P<br>GARCIA, JOSE A<br>SERRANIA A-24, GARDEN HILLS,<br>GUAYNABO, PUERTO RICO, 00966 |  | use I date ( ) ()      | man - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | . The same services     | A TAN THE AMERICAN THE A STREET OF |                           |  |
| Mire   | VP  | 1  |                        |   |                         |                                    |                           |  |
| NAME   | CUELLO, CARMEN G  |  |                        |   |                         |                                    |                           |  |
| STREET ADDRESS CITY-ST-ZIP                       | 106 SATSUMA DR<br>ALTAMONTE SPRINGS, FL 32714                                       | U00000864496<br>04/04/08-80017-005_150.00            |                        |   |                         |                                    |                           |  |
| TITLE  | S<br>MACIAC MODA  |  |                        |   | 01101100                | 00027 0                            | 30 100100                 |  |
| NAME<br>STREET ADDRESS                           | MACIAS, NORA<br>  SERRANIA A-24, GARDEN HILLS,                                      |  |                        |   | NOT W                   | DITE                               |                           |  |
| CITY-ST-ZIP                                      | BUAYNABO, PUERTO RICO, 00966  |  |                        | DO  | NOT W                   | KIIE                               |                           |  |
| TITLE<br>NAME                                    |   |  |                        | IN T                                      | HIS SF                  | PACE                               |                           |  |
| STREET ADDRESS<br>CITY-ST-ZIP                    |   |  |                        |   |                         |                                    |                           |  |
| TITLE<br>NAME                                    |   |  | 1                      |   |                         |                                    |                           |  |
| STREET ADDRESS<br>CITY-ST-ZIP                    | - T - Fr. 4 - 13 .  |  |                        |   |                         |                                    |                           |  |
| TITLE<br>NAME                                    | of the Mark No. 10 East 19 East 19  |  |                        |   |                         |                                    |                           |  |

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address; with all other like empowered.

**SIGNATURE:** 

in general

ATMENON FOR CHOLING

OFECAL SUPERIOR

STREET ADDRESS

CITY-ST-ZIP

> ain aine INTED NAME OF SIGNING OFFICER OR DIRECTOR

/17/08

407-497-5 26

Daytime Phone #