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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F25721

(4)

FILED Apr 29 1997 8:00am Secretary of State

REDI OVERSEAS INCORPORATED	

Principal Place of Business Mailing Address			T (BUTTED TITO TERM) DISTRIBUTED (BUTTE DISTRIBUTED DE LE CONTRACTOR DE LA CONTRACTOR DE LE CONTRACTOR DE LA						
C/O ROBERT I 2005 SOUTHWI MIAMI FL 3315	EST 79TH AVENUE	C/O ROBERT P. LLOPIS. 2905 SOUTHWEST 79TH / MIAMI FL 33155-2506							
- MINIMI 1 & 0010		MINIMI 12 SEIGG 2550				3. Date Incorporated or Qualified 03/16/1981		ale of Last F 26/1996	Report
·	ace of Businoss	2a. Mailing Address				4. FEI Number	• •	Α	pplied For
21		26				59-2096602			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22 City 8 Chat			(27)						equired
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be				
Zip	Country	Zip Coun		undry.		Trust Fund Contribution			to Fees
24	25	29	30	шиу		8. This corporation has liability for Florida Statules	intangible] Yes [s. 199.032,
[24]	9. Name and Address of Currer		[30]	1	····	10. Name and Address of New Re			
110	PIS, ROBERT P., SR.			81	Name				
	SOUTHWEST 79TH AVENUE								
	VII FL 33155			82	Street Addr	ess (P.O. Box Number is Not Acceptal	ole)		
,,,,,	****			83					
				84	City		FL	85 Zip	Code
Office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was	authorizo	id by	named corp the corporati	oration submits this statement for the ion's board of directors. I hereby acce	ournose o	f changing i	ts registered registered
SIGNATURE	Signature, typed or printed name of registered age	ent and bled are issue (NKX)	E Registore		t signature require	eo when reinstating)	DATE		
12.	· · · · · · · · · · · · · · · · · · ·	D DIRECTORS	1 13.			ADDITIONS/CHANGES TO OFFI		DIRECTO	BS IN 12
TITLE	DP	DELETE	1.1 Ti					Change	Addition
NAME	LLOPIS, ROBERTO P		1.2 N	AME					
STREET ADDRESS	2905 S W 79T AVENUE		1.3 \$	TREELA	DDRESS	4			
CITY-ST-ZIP	MIAMI, FLORIDA 00000		1.4 C	ITY - \$1	- ZIP				
TITLE	D	DELETE	2.1 T					Change	Addition
NAME	LLOPIS, GRACIELA M		2.2 N	IAME					
STREET ADDRESS	2905 S W 79T AVENUE		2.3 \$	TREET A	DDRESS				
CITY-ST-ZIP	MIAMI, FLORIDA 00000		2.40	011Y - \$1	- 21P	(-			
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NAME			3.2 N	AME					
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TITLE		☐ DELETÉ	5 1 TI	ITLE.		•		Change	Addition
NAME			5.2 N	AME					
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C(TY-ST-ZIP			5.4 C	ITY-ST	- ZIP				
TITLE		☐ DELETE	611	ITLE				Change	Addition
NAME			6.2 N	AME					
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CITY-ST-ZIP			6.4 C	ITY - \$1	ZIP				
44 (4-1-1-1	and the state of the state of	A STATE OF THE STATE OF	(()			1: 0 // 440 09/01/15 Ft 11 Ox / 1			

4. I do 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 annial poport 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 top pleasing or the receiver or trustee empowered to execute this report as required by shapter 607, Florida Statutes; and that my name appears in Block 12 or Byock 13 Vizientlet, or or an attachment with an address.

CIGNIATURE.

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