

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 03, 2008 8:00 am
Secretary of State

03-03-2008 90400 018 ***138.75

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02192008 Chg-LLC CR2E083 (12/06)

DOCUMENT # L02000002507 1. Entity Name REDNUM INDUSTRIES LLC					
Principal Place of Business 231 ROYAL PALM WAY STE 120 PALM BEACH, FL 33480			Mailing Address 231 ROYAL PALM WAY STE 120 PALM BEACH, FL 33480		
2. Principal Place of Business - No P.O. Box # 422 SUNSET ROAD		3. Mailing Address 422 SUNSET ROAD			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State WEST PALM BEACH, FL		City & State WEST PALM BEACH, FL			
Zip 33401	Country USA	Zip 33401	Country USA	4. FEI Number 01-0585276	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent HAFT, STUART J ESQ. 340 ROYAL POINCIANA WAY, SUITE 321 PALM BEACH, FL 33480			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MUNDER, LEE P 231 ROYAL PALM WAY, STE 120 PALM BEACH, FL 33480	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
11. I hereby 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <u>LEE MUNDER, MGR</u> 2/27/08 561 802 8800					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					