FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -4 AM 10:53

DOCUMENT # **M60601** **(5)**

1. Corporation Name
REDSHIRE II CORPORATION

Principal Place of Business	Mailing Address
~~444 BRICKELL AVENUE~~	~~444 BRICKELL AVENUE~~
~~SUITE 51-246~~	~~SUITE 51-246~~
~~MIAMI FL 33131~~	~~MIAMI FL 33131~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/09/1987
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business
21 1602 Alton Road
Suite, Apt. #, etc.
22 #100
City & State
23 Miami Beach, Florida
Zip 24 33139 Country 25 U.S.A.

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 65-0036243 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~IBO FIDUCIARY, INC.~~
~~100 S E SECOND STREET~~
~~2915-A~~
~~MIAMI FL 33131~~

10. Name and Address of New Registered Agent

81 Name: EXEX INC.
82 Street Address (P.O. Box Number is Not Acceptable): 1602 Alton Road - #100
83
84 City: Miami Beach FL 85 Zip Code: 33139

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Exex INC. By: E. CARBAYO (Signature of registered agent and title if applicable) Elena Carbayo (NOTE: Registered Agent's signature required when reinstating) DATE: 7/20/95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~S~~	11 TITLE	DP	☒ Change ☐ Addition
NAME	~~CMEJDA, LUCIUS~~	12 NAME	C. EINSTEIN	
STREET ADDRESS	~~444 BRICKELL AVE #51-246~~	13 STREET ADDRESS	1602 Alton Road	
CITY-ST-ZIP	~~MIAMI FL~~	14 CITY-ST-ZIP	Miami Beach, FL 33139	
TITLE	~~DP~~	21 TITLE	VPS-D	☒ Change ☐ Addition
NAME	~~ALEXANDER, A.~~	22 NAME	J. Bowden	
STREET ADDRESS	~~51-246 444 BRICKELL AVE~~	23 STREET ADDRESS	1602 Alton Road	
CITY-ST-ZIP	~~MIAMI FL~~	24 CITY-ST-ZIP	Miami Beach, FL 33139	
TITLE	~~AST~~	31 TITLE		☐ Change ☐ Addition
NAME	~~MAXFIELD, P.~~	32 NAME		
STREET ADDRESS	~~444 BRICKELL AVE #51-246~~	33 STREET ADDRESS		
CITY-ST-ZIP	~~MIAMI FL~~	34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J. Bowden J. Bowden 1/4/95 N/A
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0132242 CP