FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

M80341 **DOCUMENT #**

(4)

RED'S AND SONS ENTERPRISES INC.

Principal Place of % CARL A. F 3720-17TH AI	FERGUSON	Mailing Address * Carl A. Ferguson 3720-17TH AVE. SO. ST. PETERSBURG FL 33711							
or. resente	10 30117	ari rananagalia i				3. Date Incorporated or Qualified 05/06/1988		of Last Re 01/13/19	
2. Principal Plac	Principal Place of Business 2a. Mailing A		ng Address			4. FEI Number Applied For 59-2958538 Not Applicable			
	Suite, Apt. #, etc. Suite		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional Required
City & State		City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Z(5) 24	Country 25	Ζ _I ρ 29	Gour 30	ntry		This corporation has liability for Florida Statutes	s 🔲 No		199.032,
	9. Name and Address of Current R	egistered Agent				10. Name and Address of New	Registered	Agent	
,				81	Name				
FERGUSON, CARL A. 3720-17TH AVE. SO.				82	Street Addre	ss (P.O. Box Number is Not Accepta	ble)		
ST. PETERSBURG FL 33711			Ì	В3					
				84	City		FL	85 Z	o Code
familiar with SIGNATHER	the provisions of Sections our Journal of Agent, or both, in the State of Florida. I, and accept the obligations of, Section In the State of Florida of Agents of Agent and Agent and Conference of	tile if application (NC	.		signature required		DATE FICERS ANI	DIRECTO	PRS IN 12
THE NAME STREET ACCRESS OUTV-ST-ZIP	DP FERGUSON, CARL A. 3720 17TH AVE. SO. ST. PETERSBURG FL	☐ DELETE		AME	ADDRESS 1- ZIP			Change	Addition
NOTE NAME STREET ALCHESS CITY-ST-7IF	DT SMITH, BRIDGET A. 827 28TH AVE. S. ST. PETERSBURG FL	□ DELETE	22N 23S		ADORESS (☐ Cnange	Addition
MAME SPREEL ADDRESS CITY ST-789	D FERGUSON, CARLA D. 2912 46TH AVE. S. ST. PETERSBURG FL	☐ DELETE		AME	ADDRESS TO ZIP			Change	Addition
TITUE NAME STHEEL ADDRESS CITY-ST-ZIE	D Smith, anthony B. 827 28th ave. S. St. Petersburg Fl	☐ DELETE		AME	ADDRESS 1-21P			☐ Change	Addition
TITLE AAV: STREET ADDRESS C TY-SE-ZE	TS CLARK-FERGUSON, CYNTHIA 3720-17TH AVE SO ST. PETERSBURG FL	DELETE		AME	ADDRESS			☐ Change	Addition
)PUF		☐ DELETE	6 1 T					☐ Change	■ Addition

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 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 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 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 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 certify that the information supplied with this filing is voluntarily furnished and accurate and that my signature shall have the same legal effect as if under the certific that the information supplied with this filing is voluntarily furnished and accurate and that my signature shall have the same legal effect as if under the certific that the information supplied with this filing is voluntarily furnished and accurate and the certific that the information supplied with this filing is voluntarily furnished and accurate and the certific that the information supplied with the certific that the information supplied with the information supplied with this filing is voluntarily furnished and accurate and the certific that the information supplied

6 3 STREET ADDRESS

6 4 CITY - ST-2IP

SIGNATURE:

STREET ADDRESS

OA PRINTED NAME OF SIGNING OFFICER OR DIRECTOR