2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # M80341 Jan 19, 2000 8:00 am 1. Entity Name **Secretary of State** RED'S AND SONS ENTERPRISES INC. 01-19-2000 90260 042 ***150.00 Principal Place of Business Mailing Address 1701 16TH STREET SOUTH 1701 16TH STREET SOUTH ST. PETERSBURG FL 33705-2531 ST. PETERSBURG FL 33705 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FFI Number City & State City & State 59-2958538 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name FERGUSON, CARL A Street Address (P.O. Box Number is Not Acceptable) 1701 16TH STREET SOUTH ST. PETERSBURG FL 33705 Zip Code FL 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ■ Addition ☐ Change ☐ Delete TITLE FERGUSON, CARL A NAME ž Š STREET ADDRESS STREET ADDRESS 3720 17TH AVE. SO. CITY-ST-ZIP CITY-ST-7IP ST. PETERSBURG FL Addition TITLE Change ☐ Delete TITLE NAME GREEN, BRIDGET NAME STREET ADDRESS 1228 ASTERIA WAY SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL 337.12 ☐ Change Addition TITLE ☐ Delete TITLE FERGUSON, CARLA D NAME NAME STREET ADDRESS STREET ADDRESS 2912 46TH AVE. S. CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Change ☐ Addition ☐ Delete TITLE SMITH, ANTHONY NAME 2521 CASILLA WAY SOUTH STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ST. PETERSBURG FL 33712 ☐ Change ☐ Addition TITLE TS ☐ Delete CLARK-FERGUSON, CYNTHIA NAME 3720-17TH AVE SO STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP I 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 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 11 or Block 12 if

Changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #