

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000025007  
Entity Name RED EYE TROLLING LURES, INC.

**FILED**  
**May 21, 2001 8:00 am**  
**Secretary of State**  
05-21-2001 90032 023 \*\*\*150.00

Principal Place of Business Mailing Address  
264 WYNNEWOOD DRIVE  
WEST PALM BEACH FLORIDA - SAME -  
3411

658428

Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
City & State City & State

DO NOT WRITE IN THIS SPACE

Zip Country USA Zip Country

4. FEI Number 36-4351359 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
ATTORNEY ALTERNATIVES, INC.  
444 W. BOYNTON BEACH BLVD.  
BOYNTON BEACH, FLORIDA 33417

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

OFFICERS AND DIRECTORS  
1. NAME TITLE  
2. NAME TITLE  
3. NAME TITLE  
4. NAME TITLE  
5. NAME TITLE  
6. NAME TITLE  
7. NAME TITLE  
8. NAME TITLE  
9. NAME TITLE  
10. NAME TITLE  
11. NAME TITLE  
12. NAME TITLE  
13. NAME TITLE  
14. NAME TITLE  
15. NAME TITLE  
16. NAME TITLE  
17. NAME TITLE  
18. NAME TITLE  
19. NAME TITLE  
20. NAME TITLE  
21. NAME TITLE  
22. NAME TITLE  
23. NAME TITLE  
24. NAME TITLE  
25. NAME TITLE  
26. NAME TITLE  
27. NAME TITLE  
28. NAME TITLE  
29. NAME TITLE  
30. NAME TITLE  
31. NAME TITLE  
32. NAME TITLE  
33. NAME TITLE  
34. NAME TITLE  
35. NAME TITLE  
36. NAME TITLE  
37. NAME TITLE  
38. NAME TITLE  
39. NAME TITLE  
40. NAME TITLE  
41. NAME TITLE  
42. NAME TITLE  
43. NAME TITLE  
44. NAME TITLE  
45. NAME TITLE  
46. NAME TITLE  
47. NAME TITLE  
48. NAME TITLE  
49. NAME TITLE  
50. NAME TITLE  
51. NAME TITLE  
52. NAME TITLE  
53. NAME TITLE  
54. NAME TITLE  
55. NAME TITLE  
56. NAME TITLE  
57. NAME TITLE  
58. NAME TITLE  
59. NAME TITLE  
60. NAME TITLE  
61. NAME TITLE  
62. NAME TITLE  
63. NAME TITLE  
64. NAME TITLE  
65. NAME TITLE  
66. NAME TITLE  
67. NAME TITLE  
68. NAME TITLE  
69. NAME TITLE  
70. NAME TITLE  
71. NAME TITLE  
72. NAME TITLE  
73. NAME TITLE  
74. NAME TITLE  
75. NAME TITLE  
76. NAME TITLE  
77. NAME TITLE  
78. NAME TITLE  
79. NAME TITLE  
80. NAME TITLE  
81. NAME TITLE  
82. NAME TITLE  
83. NAME TITLE  
84. NAME TITLE  
85. NAME TITLE  
86. NAME TITLE  
87. NAME TITLE  
88. NAME TITLE  
89. NAME TITLE  
90. NAME TITLE  
91. NAME TITLE  
92. NAME TITLE  
93. NAME TITLE  
94. NAME TITLE  
95. NAME TITLE  
96. NAME TITLE  
97. NAME TITLE  
98. NAME TITLE  
99. NAME TITLE  
100. NAME TITLE

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  
1. NAME TITLE  
2. NAME TITLE  
3. NAME TITLE  
4. NAME TITLE  
5. NAME TITLE  
6. NAME TITLE  
7. NAME TITLE  
8. NAME TITLE  
9. NAME TITLE  
10. NAME TITLE  
11. NAME TITLE  
12. NAME TITLE  
13. NAME TITLE  
14. NAME TITLE  
15. NAME TITLE  
16. NAME TITLE  
17. NAME TITLE  
18. NAME TITLE  
19. NAME TITLE  
20. NAME TITLE  
21. NAME TITLE  
22. NAME TITLE  
23. NAME TITLE  
24. NAME TITLE  
25. NAME TITLE  
26. NAME TITLE  
27. NAME TITLE  
28. NAME TITLE  
29. NAME TITLE  
30. NAME TITLE  
31. NAME TITLE  
32. NAME TITLE  
33. NAME TITLE  
34. NAME TITLE  
35. NAME TITLE  
36. NAME TITLE  
37. NAME TITLE  
38. NAME TITLE  
39. NAME TITLE  
40. NAME TITLE  
41. NAME TITLE  
42. NAME TITLE  
43. NAME TITLE  
44. NAME TITLE  
45. NAME TITLE  
46. NAME TITLE  
47. NAME TITLE  
48. NAME TITLE  
49. NAME TITLE  
50. NAME TITLE  
51. NAME TITLE  
52. NAME TITLE  
53. NAME TITLE  
54. NAME TITLE  
55. NAME TITLE  
56. NAME TITLE  
57. NAME TITLE  
58. NAME TITLE  
59. NAME TITLE  
60. NAME TITLE  
61. NAME TITLE  
62. NAME TITLE  
63. NAME TITLE  
64. NAME TITLE  
65. NAME TITLE  
66. NAME TITLE  
67. NAME TITLE  
68. NAME TITLE  
69. NAME TITLE  
70. NAME TITLE  
71. NAME TITLE  
72. NAME TITLE  
73. NAME TITLE  
74. NAME TITLE  
75. NAME TITLE  
76. NAME TITLE  
77. NAME TITLE  
78. NAME TITLE  
79. NAME TITLE  
80. NAME TITLE  
81. NAME TITLE  
82. NAME TITLE  
83. NAME TITLE  
84. NAME TITLE  
85. NAME TITLE  
86. NAME TITLE  
87. NAME TITLE  
88. NAME TITLE  
89. NAME TITLE  
90. NAME TITLE  
91. NAME TITLE  
92. NAME TITLE  
93. NAME TITLE  
94. NAME TITLE  
95. NAME TITLE  
96. NAME TITLE  
97. NAME TITLE  
98. NAME TITLE  
99. NAME TITLE  
100. NAME TITLE

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Martin Hatcher*

4-07-2001

CR2E034 (11/00)