

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90110 008 ***150.00

DOCUMENT # **PO1000040582**

1. Entity Name

RED ALL OVER PUBLISHING INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1940 Harrison Street

3. Mailing Address
8079 SW 86th Terrace

Suite, Apt. #, etc.
Suite 200-D

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Hollywood, FL

City & State
Miami, FL

4. FEI Number
65-1102722

Applied For
Not Applicable

Zip
33020

Country
US

Zip
33143

Country
US

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Michael S. Brown

Street Address (P.O. Box Number is Not Acceptable)
3195 Ponce de Leon Blvd.

City
Coral Gables FL Zip Code
33134

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

Michael S. Brown

Michael S. Brown, Treas 03/29/2002

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reconstituting)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25

Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
P/D
Meredith Anne Brown
1940 Harrison St Suite 200-D
Hollywood, FL 33020

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
S/D
Janet K. Brown
8079 SW 86th Terr
Miami, FL 33143

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
T/D
Michael S. Brown
8079 SW 86th Terr
Miami, FL 33143

TITLE
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CITY- ST- ZIP

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Michael S. Brown

Michael S. Brown, Treas 03/29/2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)