

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90653 040 ***150.00

DOCUMENT # P03000069969

1. Entity Name
REDFISH MARKETING INC.



Principal Place of Business
**10691 SW 88 ST STE 110
MIAMI, FL 33175**

Mailing Address
**10691 SW 88 ST STE 110
MIAMI, FL 33175**

2. Principal Place of Business
9750 NW 17th Street
Suite, Apt. #, etc.

3. Mailing Address
9750 NW 17th Street
Suite, Apt. #, etc.



04272004 Chg-P CR2E034 (10/03)

City & State
Miami FL
Zip
33172 Country

City & State
Miami FL
Zip
33172 Country

4. FEI Number
20-0060373 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CANCELA, EDUARDO
10691 SW 88 ST STE 110
MIAMI, FL 33175**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

9750 NW 17th Street

City **Miami**

FL

Zip Code
33172

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstalling)

4/29/04
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PT
CANCELA, EDUADRO
10691 SW 88 ST STE 110
MIAMI, FL 33175** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VS
DIAZ-ALBERTINI, LUIS
10691 SW 88 ST STE 110
MIAMI, FL 33175** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**9750 NW 17th Street
Miami FL 33172** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**9750 NW 17th Street
Miami FL 33172** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/04
Date

Daytime Phone #