

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000097303

FILED  
Apr 15, 2010  
Secretary of State

Entity Name: RED-M, INC.

**Current Principal Place of Business:**

916 HOLLY SHORE DRIVE  
LUTZ, FL 33548

**New Principal Place of Business:**

**Current Mailing Address:**

916 HOLLY SHORE DRIVE  
LUTZ, FL 33548

**New Mailing Address:**

FEI Number: 61-1433210

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FILINGS, INC.  
3732 N.W. 16TH STREET  
FT. LAUDERDALE, FL 333114132 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: CEO  
Name: FIMBEL, ROBERT D  
Address: 916 HOLLY SHORE DRIVE  
City-St-Zip: LUTZ, FL 33548

Title: D  
Name: FIMBEL, ROBERT D  
Address: 916 HOLLY SHORE DRIVE  
City-St-Zip: LUTZ, FL 33548

Title: VD  
Name: FIMBEL, EDWINA  
Address: 916 HOLLY SHORE DRIVE  
City-St-Zip: LUTZ, FL 33548

Title: SD  
Name: FIMBEL, DAVID M  
Address: 916 HOLLY SHORE DRIVE  
City-St-Zip: LUTZ, FL 33548

Title: TD  
Name: FIMBEL, MICHELLE D  
Address: 916 HOLLY SHORE DRIVE  
City-St-Zip: LUTZ, FL 33548

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT D. FIMBEL

CEOP

04/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date