


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 17, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P06000083755</b>	
1. Entity Name <b>RED SPIDER WEB INVESTMENTS, INC</b>	

Principal Place of Business <b>1810 S.W. 105TH AVENUE FORT LAUDERDALE, FL 33324 US</b>	Mailing Address <b>1810 S.W. 105TH AVENUE FORT LAUDERDALE, FL 33324 US</b>
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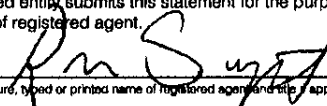
03082008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>NOT APPLICABLE</b>	Applied For <b>Not Applicable</b>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>SARGEANT, KRISTOPHER 1810 S.W. 105TH AVENUE FORT LAUDERDALE, FL 33324</b>
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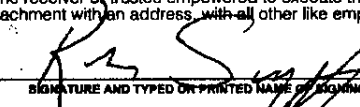
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IN THIS SPACE**

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 	DATE <b>3/8/08</b>
<small>Signature, typed or printed name of registered agent and date, applicable. (NOTE: Registered Agent signature required when reinstating)</small>	

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE <b>P</b>	<b>SARGEANT, KRISTOPHER 1810 S.W. 105TH AVENUE FORT LAUDERDALE, FL 33324</b>
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	<b>DO NOT WRITE IN THIS SPACE</b>
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04/03/08-80015-006 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 	<b>3/8/08</b> <b>954-309-1585</b> <small>Signature and Typed or Printed Name of Signing Officer or Director Date Daytime Phone #</small>