

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P06000085717

**FILED**  
**Jun 10, 2010**  
**Secretary of State**

**Entity Name:** REDCELL TECHNOLOGIES, INC.

**Current Principal Place of Business:**

11314 MARLEE CT.  
TAMPA, FL 33635

**New Principal Place of Business:**

12157 W. LINEBAUGH AVE #122  
TAMPA, FL 33626

**Current Mailing Address:**

11314 MARLEE CT.  
TAMPA, FL 33635

**New Mailing Address:**

12157 W. LINEBAUGH AVE #122  
TAMPA, FL 33626

**FEI Number:** 20-5166238

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LAJEUNESSE, TENNYSON L  
11314 MARLEE CT.  
TAMPA, FL 33635 US

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

LAJEUNESSE, TENNYSON L  
12157 W. LINEBAUGH AVE #122  
TAMPA, FL 33626 US

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:

06/10/2010

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

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LAJEUNESSE, TENNYSON L  
Address: 11314 MARLEE CT.  
City-St-Zip: TAMPA, FL 33635

Title: VP  
Name: WILSKE, ROBERT  
Address: 1139 CORD GRASS CT.  
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: SEC  
Name: LAJEUNESSE, TENNYSON  
Address: 11314 MARLEE CT.  
City-St-Zip: TAMPA, FL 33635

Title: TRE  
Name: LAJEUNESSE, ALEXA  
Address: 11314 MARLEE CT.  
City-St-Zip: TAMPA, FL 33635

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: TENNYSON LAJEUNESSE

P

06/10/2010

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

\_\_\_\_\_  
Date