

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000071082

FILED  
Jan 10, 2009  
Secretary of State

Entity Name: RED HYDRANT ENTERPRISES, INC.

**Current Principal Place of Business:**

860 NE 75TH STREET  
MIAMI, FL 33138

**New Principal Place of Business:**

**Current Mailing Address:**

860 NE 75TH STREET  
MIAMI, FL 33138

**New Mailing Address:**

FEI Number: 65-3091355

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STANDER, ALAN E CPA  
4801 S. UNIVERSITY DRIVE  
SUITE 3100  
DAVIE, FL 33328 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: D ( ) Delete  
Name: DE LA FLOR, NEIL  
Address: 860 NE 75TH STREET  
City-St-Zip: MIAMI, FL 33138

Title: D ( ) Delete  
Name: GALLARDO, HECTOR  
Address: 860 NE 75TH STREET  
City-St-Zip: MIAMI, FL 33138

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: NEIL DE LA FLOR

DIRE

01/10/2009

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

\_\_\_\_\_  
Date