## **FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00**

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Conversion Name " F 3000000 17 23 [1	DOCUMENT #	P93000001729	(1)
--------------------------------------	------------	--------------	-----

REDWOOD HOT TUBS INC.				
Principal Place of Business	Mailing Address		) things us sales with print odes to	tin dinini albanı bilkic annın arban elkir indi.
8125 NW 17 ST Margate FL 33063	6125 NW 17 ST Margate FL 33063-27	38		
			3. Date Incorporated or Qualified 01/06/1993	3a, Date of Last Report 05/01/1996
2. Principal Place of Business	2a. Mailing Address	····	4. FEI Number	Applied For
	26		65-0165247	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
2	City & State			Fee Required
City & State	28 State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country	Zip	Country	This corporation has liability for	
25	29	30		Yes No
	Current Registered Agent	15-1	10. Name and Address of New R	
HASTING, CHARLES M		81 Name		
6125 NW 17 ST	,	82 Street Add	dress (P.O. Box Number is Not Accepte	ible)
MARGATE FL 33063				
		83		
		84 City		85 Zip Code
	·	1 1 1		<b>]-L</b>
agent. Lam familiar with, and accept th	ne obligations of Section 607.0505,	Florida Statutes	and the begins of an ectors. I thereby addition	purpose of changing its registered ept the appointment as registered
SIGNATURE Signature, typed or printed name of region	stured agent and title if applicable (I	NOTE: Registered Agent signature req	juired when reinstating)	DATE
SIGNATURE Signature, typed or protest name of region 2. OFFICE	stured agent and title if applicable (I	NOTE: Registered Agent signature req		DATE ICERS AND DIRECTORS IN 12
SIGNATURE Skipharure, typied or prohisd name of regional Properties.  12. OFFICE  P	stured agent and title if applicable (I	NOTE: Registered Agent signature req	juired when reinstating)	DATE
SIGNATURE Signature, typed or probabliname of regional parties of the probability of the	stured agent and title if applicable (I	NOTE: Registered Agent signature req 13. 11 TITLE 12 NAME	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12
SIGNATURE Signature, typed or protest name of region 12.  OFFICE THE PHASTING, CHARLES SINEER ADDRESS 6125 NW 17 ST.	stured agent and title if applicable (I	NOTE: Registered Agent signature req  13.  11 TITLE  12 NAME  1.3 STREET ADDRESS	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12
Signature typed or professioname of reginate     12. OFFICE     ITTE	Stored agent and title of applicable (I	NOTE: Registered Agent signature req  13.  11 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE  Signature, typed or profest name of regineration of the profession of the	stured agent and title if applicable (I	NOTE: Registered Agent signature req  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12
SIGNATURE Signature, typed or printed name of reginerative, typed name of re	Stored agent and title of applicable (I	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE Signature, typed or printed name of regions.  I.E. OFFICE VAME SINEER ADDRESS B125 NW 17 ST. MARGATE FL 33083  ITTLE VAME STREET ADDRESS	Stored agent and title of applicable (I	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE Signature, typed or printed name of regional parties, typed or printed name of regional parties, typed or printed name of regional parties.  P HASTING, CHARLES 6125 NW 17 ST. MARGATE FL 33063  ITTLE VAME STREET ANDRESS CITY ST-ZP	Stored agent and title of applicable (I	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE Signature, typed or probed name of regional particle probed of probed name of regional particle probes of the probed name of regional particle probes of the pro	Interest agent and title of applicable (I) IRS AND DIRECTORS DELETE DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TILE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE Signature, typed or protest name of regional parts of the protest name of regional parts.  DELE PHASTING, CHARLES 6125 NW 17 ST. MARGATE FL 33063  DITTE NAME STREET ADDRESS CITY ST - Z.P.  DITTE NAME	Interest agent and title of applicable (I) IRS AND DIRECTORS DELETE DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE Signature, typed or pented name of region 12.  OFFICE NAME SIREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Instruct agent and title of applicable (I) IRS AND DIRECTORS DELETE DELETE DELETE	NOTE: Registered Agent signature req  13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE Signature, typed or protest name of regional file.  OFFICE NAME SINEE ADDRESS B125 NW 17 ST. MARGATE FL 33063  ILLE VAME STREET ADDRESS CITY ST-ZP  ILLE NAME STREET ADDRESS CITY ST-ZP	Interest agent and title of applicable (I) IRS AND DIRECTORS DELETE DELETE	13.  11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 31 TITLE 32 NAME 3.3 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE Signature, typied or pented name of regional parts of region of the pented name of the pented name of region of the pented name	Instruct agent and title of applicable (I) IRS AND DIRECTORS DELETE DELETE DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE Signature, typed or pented name of regional 12.  OFFICE NAME SIREET ADDRESS CITY ST-ZIF THE NAME STREET ADDRESS CITY ST-ZIP THE NAME STREET ADDRESS	Instruct agent and title of applicable (I) IRS AND DIRECTORS DELETE DELETE DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE Signature, typed or pentist name of regional parts.  12. OFFICE NAME NAME SIRECT ADDRESS CITY ST-ZIP THE NAME STREET ADDRESS CITY ST-ZIP	Stured agent and title if applicable (IFRS AND DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE SIGNATURE SIGNATURE  SIGNATURE OFFICE  P HASTING, CHARLES 6125 NW 17 ST. MARGATE FL 33063  IIILE VAME STREEL ADDRESS CITY ST-ZP TILLE NAME STREEL ADDRESS CITY ST-ZP TILLE	Instruct agent and title of applicable (I) IRS AND DIRECTORS DELETE DELETE DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition
SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICE  P HASTING, CHARLES 6125 NW 17 ST. MARGATE FL 33063  IIILE VAME STREEL ADDRESS CITY ST-ZP TILLE NAME NAME STREEL ADDRESS CITY ST-ZP TILLE NAME	Stured agent and title if applicable (IFRS AND DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE SIGNATURE SIGNATURE  OFFICE  NAME  SINGE ADDRESS CITY ST-ZIF TITLE  NAME STREET ADDRESS CITY ST-ZP TITLE  NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	Stured agent and title if applicable (IFRS AND DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE SIGNATURE SIGNATURE OFFICE  12. OFFICE NAME SINGE ADDRESS CITY ST-ZIF TILLE NAME STREET ADDRESS CITY-ST-ZP TILLE NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS CITY-ST-ZIP TILLE NAME STREET ADDRESS CITY-ST-ZIP	Stored agent and title of applicable ()  TRS AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 5.5 TITLE 5.5 NAME 5.5 STREET ADDRESS 5.6 CITY-ST-ZIP	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
SIGNATURE SIGNATURE SIGNATURE SIGNATURE DELE NAME SINEELADDRESS CITY ST-ZIF TIGLE NAME STREELADDRESS CITY ST-ZIF TIGLE NAME STREELADDRESS CITY ST-ZIF TIGLE NAME STREELADDRESS CITY ST-ZIP TIGLE	Stured agent and title if applicable (IFRS AND DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.3 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition
SIGNATURE SIGNATURE SIGNATURE SIGNATURE DELE NAME SINEEL ADDRESS CITY ST-ZIF TIGLE NAME STREEL ADDRESS CITY ST-ZIF TIGLE NAME STREEL ADDRESS CITY ST-ZIP TIGLE NAME NAME	Stored agent and title of applicable ()  TRS AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2 4 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 41 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 52 NAME	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition
SIGNATURE SIGNATURE SIGNATURE SIGNATURE DELE NAME SINEELADDRESS CITY ST-ZIF TIGLE NAME STREELADDRESS CITY ST-ZIF TIGLE NAME STREELADDRESS CITY ST-ZIF TIGLE NAME STREELADDRESS CITY ST-ZIP TIGLE	Stored agent and title of applicable ()  TRS AND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.3 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	juired when reinstating)	DATE ICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition

SIGNATURE:

SIGNAL AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/97 977-2462

**FILED** 

Apr 28 1997 8:00am

Secretary of State