

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000080278 (3)

1. Corporation Name

REDNET PRODUCTS COMPANY



Principal Place of Business

Mailing Address

21831 NW 6 ST  
PEMBROKE PINES FL 33029

POST OFFICE BOX 821426  
SOUTH FLORIDA FL 33082-1426  
US

3. Date Incorporated or Qualified

11/22/1993

3a. Date of Last Report

08/11/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc

26

21831 NW 6 ST

27

Suite, Apt. #, etc

22

City & State

27

City & State

23

Zip

Country

28

City & State

24

Zip

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

WARD, DONALD A  
21831 NW 6 ST  
PEMBROKE PINES FL 33029

10. Name and Address of New Registered Agent

81

Name

82

Street Address (P.O. Box Number is Not Acceptable)

83

84

City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of application

(NOTE: Registered Agent Signature required when no change)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

PS  
WARD, DONALD A  
21831 NW 6 ST  
PEMBROKE PINES FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

VPT  
LANDIS, SHERYL  
9342 GETTYSBURG ROAD  
BOCA RATON FL

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

VP  
WARD, SCOTT  
3408 MELBROOK DRIVE, APARTMENT 38  
SAN ANGELO TX

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-7-96

954-433-2422

CR2E034 (3/96)