

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Kendra S. Matheson  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

95 APR 17 AM 9:14  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DO NOT WRITE IN THIS SPACE

**DOCUMENT # P94000004924 (4)**

1. Corporation Name

**RED CONSTRUCTION, INC.**

Principal Place of Business

14285 SW 285TH TER  
MIAMI FL 33033

Mailing Address

14285 SW 285TH TER P.O. BOX 4366  
MIAMI FL 33033 PRINCETON, FL.  
33092

3. Date Incorporated or Qualified

01/20/1994

3a. Date of Last Report

01/20/1994

4. FEI Number

65-0460135

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 119.032, Florida Statutes  Yes  No

2. Principal Place of Business

21 14285 S.W. 285TH TER

2a. Mailing Address

26 P.O. BOX 4366

State Apt #, etc

Suite, Apt #, etc

City & State

23 LEISURE, CITY FL

City & State

28 PRINCETON, FL, 33092

24 33033

25 DADE

29 33092

30 DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MENDOZA, JULIAN  
14285 SW 285TH TER  
MIAMI FL 33033

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) (Print or typed name of registered agent and title if applicable)

(Signature) (Print or typed name of registered agent and title if applicable)

(Title)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME MENDOZA, JULIAN  
STREET ADDRESS 14285 SW 285TH TER  
CITY ST ZIP MIAMI FL 33033

11 TITLE  Change  Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY ST ZIP

TITLE STD  
NAME MENDOZA, JOSE J  
STREET ADDRESS 24300 SW 140TH AVE  
CITY ST ZIP MIAMI FL 33033

21 TITLE  Change  Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY ST ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

31 TITLE  Change  Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY ST ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

41 TITLE  Change  Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY ST ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

51 TITLE  Change  Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY ST ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY ST ZIP

61 TITLE  Change  Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY ST ZIP

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)(b), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*(Signature)*  
PRINTED AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/95 (305) 268-5536  
Date (Signature)