

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

**FILED**  
**May 13 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P94000029391 (7)**  
 1. Corporation Name  
**FLAMINGO RED, INCORPORATED**



Principal Place of Business <b>360 CYPRESS DR TEQUESTA FL 33469</b>	Mailing Address <b>360 CYPRESS DR TEQUESTA FL 33469</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>150 N. US Highway One #13</b>		2a. Mailing Address 26 <b>150 N. US Highway One #13</b>		3. Date Incorporated or Qualified <b>04/19/1994</b>	
Suite, Apt. #, etc. 22 <b>#13</b>		Suite, Apt. #, etc. 27 <b>#13</b>		4. FEI Number <b>65-0477012</b>	
City & State 23 <b>Tequesta, FL 33469</b>		City & State 28 <b>Tequesta, FL 33469</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
Zip 24		Zip 29		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Country 25		Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>DYKE, CAROL 360 CYPRESS DR TEQUESTA FL 33469</b>				10. Name and Address of New Registered Agent			
81 Name <b>Carol Dyke</b>				82 Street Address (P.O. Box number, if Not Applicable) <b>150 N. US Highway One</b>			
83 <b>Suite 13</b>				84 City <b>Tequesta, FL</b>			
				85 Zip Code <b>33469</b>			

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: \_\_\_\_\_ DATE: **March 31, 1998**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DYKE, BEN 2nd request</b>	1.2 NAME	
STREET ADDRESS	<b>318 COUNTRY CLUB DR</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>TEQUESTA FL 33469</b>	1.4 CITY-ST-ZIP	
TITLE	<b>TV</b> <input type="checkbox"/> DELETE	2.1 TITLE	<b>President</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DYKE, CAROL</b>	2.2 NAME	<b>Carol Dyke</b>
STREET ADDRESS	<b>360 CYPRESS DR</b>	2.3 STREET ADDRESS	<b>150 N. US Highway One, #13</b>
CITY-ST-ZIP	<b>TEQUESTA FL</b>	2.4 CITY-ST-ZIP	<b>Tequesta, FL 33469</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 in an attachment with an address.

SIGNATURE: *Carol Dyke* **President** DATE: **March 31, 1998** TELEPHONE: **561-746-0444**

CR2E034 (10/97)