

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

FILED

May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000001385 (0)**

1. Corporation Name

REDI MANUFACTURING, INC.

Principal Place of Business

**12660 34TH STREET NORTH, UNIT A1
CLEARWATER FL 34622**

Mailing Address

**12660 34TH STREET NORTH, UNIT A1
CLEARWATER FL 34622**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/06/1995

4. FEI Number

59-3286871

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

**CURPHEY, WILLIAM E
STILES, TAYLOR & METZLER, P.A.
315 PLANT AVE.
TAMPA FL 33606**

10. Name and Address of New Registered Agent

81 Name

James Thompson

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

Box 315 Plant Ave.

83

84 City

Tampa

FL

85

Zip Code

33606

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

James N. Thompson 4/27/98

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **RODRIGUEZ, MIGUELINA**
STREET ADDRESS **10416 ASHLEY OAKS DRIVE**
CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE **D** ☐ DELETE
NAME **RODRIGUEZ, RENE**
STREET ADDRESS **10416 ASHLEY OAKS DRIVE**
CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE **D** ☐ DELETE
NAME **RODRIGUEZ, DIORIS**
STREET ADDRESS **10416 ASHLEY OAKS DRIVE**
CITY-ST-ZIP **RIVERVIEW FL 33569**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 on an attachment with an address.

SIGNATURE: **Miguelina Rodriguez**

4/27/98 572-4804

CP2E034 (10/97)