

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # *P95000003956*

1. Corporation Name

Red Trail Investments, Inc.

Principal Place of Business

661 S.W. 57 Avenue
Miami, FL 33144

Mailing Address

P.O. Box 011590
Miami, FL 33101-1590

3. Date Incorporated or Qualified

Jan 17, 1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

65-0561013

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. 199.032,
Florida Statutes ☒ Yes ☐ No

22

27

23

28

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Neil Schaffel, Esq.
11400 N. Kendall Dr., Ste 214
Miami, FL 33176

81

Name

Maria C. Hernandez

82

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

10235 S.W. 66 Street

83

84

City

Miami

FL

85

Zip Code

33173

11. Pursuant to the provisions of Sections 197.0502 and 607.1504, 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 provisions of Section 607.1505, Florida Statutes.

SIGNATURE

Maria C. Hernandez

7-19-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME P.
Maria C. Hernandez
STREET ADDRESS 10235 S.W. 66 Street
CITY-ST-ZIP Miami, FL 33173

TITLE ☐ DELETE

NAME T.S.
Miguel Hernandez
STREET ADDRESS 10235 S.W. 66 Street
CITY-ST-ZIP Miami, FL 33173

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

2. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

3. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

4. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

5. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

6. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 its predecessor or trustee or authorized 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 a separate sheet with an address.

SIGNATURE:

Maria C. Hernandez

Maria C. Hernandez

7-19-96

(305) 374-2940

CR2E034 (12/95)