

FILED

05-10-2001 90194 002 ***150.00

03572

REDISCH CONSULTING, INC.

6715 CAPE SABLE WAY NE
APT 1
SAINT PETERSBURG FL 33702

Name Redisch, David M
Street Address (P.O. Box Number is Not Acceptable)
6715 Cape Sable Way NE
Apt 1
City St Petersburg FL

SIGNATURE David M. Keiser, President

(NOTE: Registered Agent signature required when reinstating)

DATE _____

\$5.00 May Be
Added to Fees

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David M Redisch David M Redisch 4/28/01 727/527-5697

Date _____

Daytime Phone # _____

CR2E034 (10/00)