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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090556 (8)

RED'AS BILLING, INC.

	. •						
Principal Place of Business Mailing Address						T TOUTHOUT FLOT ESTITE ESTITE BOTTLE BOTTLE STORT BOTTLE B	
717 PONCE	DE LEON BLVD.	717 PON	717 PONCE DE LEON BLVD.				
#223		#223					
CORAL GABI	LES FL 33134	CORAL C	CORAL GABLES FL 33134				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							11/29/1995
$\overline{}$	Place of Business	L `	2a. Mailing Address				4. FEI Number Applied For
21]	# ala	26	-44				65-0622063 Not Applicable
Suite, Apt.	#, etc.		Suite, Apt #, etc.				5. Certificate of Status Desired S8.75 Additional
City & Stat			City & State				Fee Required
·	.c	ļ	City & State				6. Election Campaign Financing \$5.00 May Be
Zip	Country	28	Zip Country				1 Trust Fund Contribution
24	25	F-3	ŀ	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24]	9, Name and Address of Curren	29 Registered A		30			10. Name and Address of New Registered Agent
	E, XIOMARA		3		31	Name	**************************************
	00 S. DADELAND BLVD.			_			
#7				6	32	Street A	t Address (P.O. Box Number is Not Acceptable)
	AMI FL 33134				33		
MI	MINI FL 33134			- 1	~		
				8	34	City	85 Zip Code
44 Durayant	to the provinians of Continue 607.0(0)	2 and CO7 1600	Elorido Ctotudo	n the pla		nomed a	FL 03 24 0000
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, 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 age:			- 4. 575. F. S. S.			
12.	OFFICERS AND		ie (NDIE	13.	Agent	t signature r	ra required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD) Diff. OTOHS	DELETE	1.1 1111	F		Change Addition
NAME	D'ALERTA, RENE			1.2 NAM			Unango Aoundon
STREET ADDRESS	717 PONCE DE LEON BLVD.	#233			1.3 STREET ADDRESS		
	AARAL AARICA EL SAASA				· ·		
CITY-ST-ZIP TITLE	VD		DELETE		1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	D'ALERTA, MARIO		LJ bittil				ET change E'T wonton
	717 PONCE DE LEON BLVD.	#000		2.2 NAM			
STREET ADDRESS	CORAL GABLES FL 33134	#200		2.3 STAL			
CITY-ST-ZIP TITLE	SD SD		DELETE	2.4 C(T)		- ZIP	Change Addition
-	D'ALERTA, GIANNI		L. J DITTE	31 TITLE			Change Addition :
NAME	717 PONCE DE LEON BLVD.	#999		32 NAM			
STREET ADDRESS	CORAL GABLES FL 33134	# 2 00		3 3 S1RE			
CITY-ST-ZIP			L DOUGLE	3.4. CITY		- <u>21P</u>	
TATLE	TD		DELETE	4.1 11111		1	Change Addition
NAME	D'ALERTA, LEONARDO M	#000		4. 2 NAN		- 1	
STREET ADDRESS	717 PONCE DE LEON BLVD.	# <i>2</i> 33		4.3 STRE			
CITY-SI-ZIP			4.4 CITY-			ZIP	
TITLE			☐ DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME				5.2 NAM	F	-	
STREET ADDRESS				5.3 STRE	ET A	DDRESS	
CITY-ST-ZIP				5.4 CITY	- 51-	ZIP	
TITLE			DELETE	6.1 THE	F		Change Addition
NAME				6.2 NAM	ŀ		
STREET ADDRESS				63 STRE	ET AC	DDRESS	

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 director or trustee only wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attactment with an addition.

CR2F034 (10/97)

FILED

Jan 20 1998 8:00am

Secretary of State