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

CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

	MENT # P9600 N REDNECK TRADING CO)				
Principal Plac	Principal Place of Business Mailing Address				reminore san sanna drivin basin noann besian besian ind:	DE OLIMA BODIO BIODA INDI 1881 1881	
102-A W. SHELLPOINT RD RUSKIN FL 33570		102-A W. SHELLPOINT RD RUSKIN FL 33570			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		Ì
Principal C	Dings of Business	2a. Mailing Address			02/13/1996 4. FEI Number	I I a compare	
2. Principal Place of Business		— ·	26. Walling Address		59-3362153	Applied Fo	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additiona		
22		27		5. Certificate of Status Desired	Fee Required	.	
City & Stat	е	City & State	28		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
Zi#	Country	Zip	Country	′	8. This corporation owes or has paid the cu		
24	25	29	30			Yes No	Щ
	9. Name and Address of Cur	rent Hegistered Agent	81	Name	10. Name and Address of New Registered	Agent	
102	vis, anne w 2-a w. Shellpoint RD Skin Fl 33570		83	Street Add	ress (P.O. Box Number is Not Acceptable)		
			64	City	FL	85 Zip Code	
SIGNATURE	Signature, typed or printed name of registered	agont and title if applicable (N	NOTE: Registered Ag		poration submits this statement for the purpose of tion's board of directors. I hereby accept the app price when reinstating) DATE		red
12.	,	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS ANI	DIRECTORS IN 12	itian
NAME	PD CAMPON CAMPON D	T DECEME	1.1 TITLE			□ crange □ Auu	KIUKI
STREET ADDRESS CITY-ST-ZIP	COUNCIL, SANDRA R 102-A W. SHELLPOINT RD RUSKIN FL		1.2 NAME 1.3 STREET 1.4 City-1				ļ
TITLE	STD DELETE		21 TITLE	51-24		☐ Change ☐ Add	ition
NAME			2.2 NAME			-	
STREET ADDRESS	414 4TH ST SW		2.3 STREET	ADDRESS			
CITY-ST-ZIP	RUSKIN FL		2. 4 CITY -	ST-ZIP			i
TITLE		DELETE	3.1 TITLE			Change Addi	ition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP		T 25.5-5-	3.4. CITY-	ST-ZIP			ilia:
TITLE	DELETE .		4.1 TITLE	1		Change Addi	100f
NAME CTRCCT ADDOCCC			4. 2 NAME				
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP_		DELETE	4.4 CITY - 8 5.1 TITLE	or-ZP		Change Addi	ition
NAME		pere re	5.2 NAME				
STREET ADORESS			4	ADDRESS			1

CITY-ST-ZIP 14. Thereby 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 trusted 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

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

FILED

May 01 1998 8:00am

Secretary of State

813-645-7710