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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000038767 (5)

RED ROAD GAS & OIL CORP.

Principal	Place	of Ru	einae	

FILED Jul 09 1997 8:00am Secretary of State



(20K)021-0KILL

Principal Place of Business 17600 N. BAY ROAD, #702 NORTH MAMI BEACH FL 33160		Mailing Address	Mailing Address 17600 N. BAY ROAD. #702 NORTH MIAMI BEACH FL 33160-2866		. 1881/888 410 19/18 8/1/1 19/1/ BB///		
		17800 N. BAY ROAD. #702					
					3. Date Incorporated or Qualified 05/02/1996	3a. Date of Last Report	
	Place of Business	2a. Mailing Address			4. FEI Number	Applied F	
21 Culto Am		26				Not Applie	
Sulte, Ap	i. #, GiC.	Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Addition Fee Required	
CRV & 518	ate	City & State			6. Election Campaign Financing	\$5.00 May B	———
23		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Countr	у	8. This corporation has fiability for in		32,
24	25 9. Name and Address of Curre		30			Yes No	
		ent Registered Agent	81	Name	10. Name and Address of New Reg	Istered Agent	
	LICHMAN, DAVID						
17600 N. BAY ROAD, #702		62	Street Add	treet Address (P.O. Box Number is Not Acceptable)			
. NO	ORTH MIAMI BEACH FL 33160		83	3			
,			84			or Zin Code	
¥			84	City		FL 85 Zip Code	
office or agent. I	am familiar with, and accept the obli	502 and 607, 1508, Florida Statute te of Florida Such change was a gations of, Section 607,0505, Flo	es, the abov uthorized b rida Statute	ve-named corp by the corpora es.	poration submits this statement for the pi tion's board of directors. I hereby accep	rpose of changing its regist the appointment as register	red
	Signature, lyped or printed name of registered a			gent signature requi	ired when reinstating)	DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	D D	☐ DELETE	1.1 THLE			Change Ac	ddition
NAME	KALICHMAN, DAVID		1.2 NAME				
STREET ADDRESS		ΙΦΛ		T ADDRESS			
CITY-ST-ZIP TITLE	NORTH MIAMI BEACH FL 33	DELETE	1.4 CITY -	ST-ZIP		☐ Change ☐ Ac	ddition
NAME	KUSHNIR, SVETLANA	ב זוננונ	2.1 TITLE 2.2 NAME			L Utatige L A	ווטואטנ
STREET ADDRESS	1			T ADDRESS			
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33	160	2.4 CITY	1			
TITLE	D	DELETE	3.1 TITLE	. 21-211		☐ Change ☐ Ac	ddition
NAME	VINBAYTEL, NATHAN		3 2 NAME				
STREET ADDRESS			•	T ADDRESS			
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33	180	3.4. CITY-				
TITLE	TOTAL MARKET SERVICE S	☐ DELETE	4.1 TITLE	D. 2		Change Ac	ddition
NAME			4. 2 NAME	.			
STREET ADDRESS			4.3 STREE	1 ADDRESS			
CITY-ST-ZIP			4.4 CITY)			
TITLE		☐ DELETE	5.1 TITLE			☐ Change ☐ Ac	ddition
NAME			5.2 NAME				
STREET ADDRESS	· .		5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-7IP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Ac	ddition
NAME			6.2 NAME				
STREET ADDRESS	.] · ·			T ADORESS			
CITY-ST-ZIP			6.4 CITY -	Į.			
	eby certify that the information suppl	ied with this filing does not qualify			d in Section 119 07/3\/i). Florida Statutes	I further certify that the	

The reserve certify that the information supplied with this militing 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.

CHERTAGEN A DEPOSIT