## 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

POCUMENT # P96000038767 (5)

RED ROAD GAS & OIL CORP.

Mailing Address

## **FILED** May 08 1998 8:00am Secretary of State



Principal Place of Business 17600 N. BAY ROAD, #702 17600 N. BAY ROAD, #702 NORTH MIAMI BEACH FL 33160 NORTH MIAMI BEACH FL 33160 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/02/1996 2. Principal Place of Business 2a. Mailing Address Applied For 65-0766954 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country  $Z\phi$ Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. ☐ Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name KALICHMAN, DAVID 17600 N. BAY ROAD, #702 Street Address (P.O. Box Number is Not Acceptable) 82 NORTH MIAMI BEACH FL 33160 83 City Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, 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 obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Addition Change TITLE Ū 1.1 TITLE NAME KALICHMAN, DAVID 1.2 NAME 17600 N. BAY ROAD, #702 STREET ADDRESS 1.3 STREET ADDRESS **NORTH MIAMI BEACH FL 33160** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE KUSHNIR, SVETLANA NAME 2.2 NAME 17600 N. BAY ROAD, #702 STREET ADDRESS 2.3 STREET ADDRESS NORTH MIAMI BEACH FL 33160 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE **VINBAYTEL, NATHAN** NAME 3.2 NAME 17600 N. BAY ROAD, #702 STREET ADDRESS 3.3 STREET ADDRESS

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 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.

3.4. CITY - ST-ZIP

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST- ZIP

4.1 TITLE

4.2 NAME 4.3 STREET ADDRESS

5.5 TITLE 5.2 NAME

6 1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

AND ORIES SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE NAME NORTH MIAMI BEACH FL 33160

(305) 932 9541

Addition

Addition

Addition

Change

☐ Change

Change