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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Jun 05 1997 8:00am

Secretary of State

DOCUMENT # P96000060332 (9)

THE REDMOND GROUP, INC.

, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
Principal Plac	e of Business	Mailing Address				
8410 N.W. 85TH WAY #282 FT. LAUDERDALE FL 33351		3410 N.W. BSTH WAY #292* FT. LAUDERDALE FL 33351-8695				
					3. Date Incorporated or Qualified 07/18/1996 3a. Date of Last Report	
2. Principal P	2a. Mailing Address	dress		. /	4. FEI Number Applied For	
21 3410		26 3410 N.W. 8	35 17	NA	Y	65-0685733 Not Applicable
Sulte, Apt. #, etc. 22 # 104		Suite Apt. #, etc.			Certificate of Status Desired Section	
City & State	LAUDCHDALE, FL.	City & State 28 FT LAUDERD	1015	FL		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	28 71. LAUBERT	Count			Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199,032,
——— ` <u> </u>	- 10695 25 U.SA.	20 333517665 30	_).S.A		Florida Statutes Yes No
	9. Name and Address of Current		: 	~~	•	10. Name and Address of New Registered Agent
REDMOND, THOMAS H				1 Name		
3410 NW 85TH WAY			8:	Street	Addre	ss (P.O. Box Number is Not Acceptable)
4 SUN	TE #202 # 104		Ľ	- Gircoi	ACCIO	33 (1.3. DOX NOTING 13 NOT NOCODUCTION
SUN	IRISE FL 33351		8:	3		
			8	4 City		FL 85 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						
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 agent and little if applicable (NOTE: Registered Agent signature required when reinstating)						
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD THOMAS H	☐] DELETE	1.1 TITLE			Change Addilion
NAME REDMOND, THOMAS H STREET ADDRESS 3410 SW 85TH WAY, #202			1.2 NAME			
STREET ADDRESS	SUNRISE FL 33351			T ADDRESS	1	
TITLE VSTD		DELETE	1.4 CITY-S1-ZIP 2.1 TITLE		 -	Change Addition
NAME	REDMOND, TERESA M	been	2.2 NAME		1	Change Addition
STREET ADDRESS	3410 N.W.TH WAY, #202		l.			
CITY-ST-ZIP	SUNRISE FL 33351		2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP			
TITLE			3.1 TITLE		 	Change Addition
NAME	<u> </u>		3.2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS		1	
CITY-\$1-ZIP			3.4. CITY-ST-7IP		1	
TITLE	DELETE 4.1		4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-2IP			4.4 CITY-S1-ZIP		<u> </u>	
TITLE	DELETE 5.		5.1 TITLE		1	☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	1 ADDRESS		
CITY-ST-ZIP			5.4 CITY-			
TITLE		DELETE 6.1 TIT				Change Addition
NAME			62 NAME			

14. To 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 logal 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.

SIGNATURE:

Output

Deep 125/97 (95) 745-4679