

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000075851

FILED
Feb 04, 2009
Secretary of State

Entity Name: REDEVCO ENTERPRISES INC.

Current Principal Place of Business:

11098 BISCAYNE BLVD.
103
MIAMI, FL 33161

New Principal Place of Business:

Current Mailing Address:

11098 BISCAYNE BLVD.
103
MIAMI, FL 33161

New Mailing Address:

FEI Number: 65-0712451

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOLSKY, DEBRA S
11098 BISCAYNE BLVD STE 103
MIAMI, FL 33161 US

Name and Address of New Registered Agent:

KOLSKY, DEBRA S
11098 BISCAYNE BLVD
#103
MIAMI, FL 33161 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

02/04/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KOLSKY, DEBRA S
Address: 11098 BISCAYNE BLVD. STE 103
City-St-Zip: NORTH MIAMI, FL 33161

Title: ST () Delete
Name: KOLSKY, ALLAN
Address: 11098 BISCAYNE BLVD. #103
City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA SINKLE KOLSKY

P/D

02/04/2009

Electronic Signature of Signing Officer or Director

Date