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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000083264

RED SAIL ENTERPRISES, INC.

Principal Pla	ace of Business	Mailing Address				- 1 (BB)(BB)(1)0 (B)(BB B)(B) B0)			
445 RED SAIL WAY		445 RED SAIL WAY	445 RED SAIL WAY						
SATELLITE BI	EACH FL 32937	SATELLITE BEACH I	FL 32937			DO NOT I	(CITE 14 T. (1		٠.
						3. Date Incorporated or Qualit	RITE IN THI	S SPACE	
] [•	10/07/1996			
⊢ ⊸ '	Place of Business	2a, Mailing Address	5	,	·	4. FEI Number			Applied For
21		26				59-3409297			Not Applicable
Suite, Apt	t. #, etc.	Suite, Apt. #, et	C.			5. Certifcate of Status Desired		·\$8.75	Additional
City & Sta	nto.	27		· .		5. Octaiodic of Ocalus Desired		Fee F	Required
23	ate · · ·	City & State				6. Election Campaign Financir	ng 🗆		🕽 Мау Ве
Zip	Country		Coul	ntry		Trust Fund Contribution			to Fees
24	25	29	30	iiu y		8. This corporation owes the o	urrent year In		⊘ u.
	9. Name and Address of Currer		[30]			Personal Property Tax. 10. Name and Address of New	v Rogistorod	☐ Yes	No.
				81 N	lame	10. ///// 21/0 // // // // // // // // // // // // /	· itogiatered	Agent	First
	ITH, ROBERT G	•	ļ						
	RED SAIL WAY			82 9	treet Addre	ss (P.O. Box Number is Not Acce	ptable)		
SAI	TELLITE BEACH FL 32937		,	83				1.5	33 761
			}.	24			<u> </u>		- 1-1-11 SSI
2 11.15 14.1	**				ity		FI	1 1 1	Code
11. Pursuant	t to the provisions of Sections 607.050	2 and 607.1508, Florida	Statutes, the ab	ove-na	med corpor	ration submits this statement for the	ne purpose of	changing it	s registered
agent. I a	am familiar with, and accept the obliga	ations of, Section 607.050	was authorized	'nv ine	corporation	ration submits this statement for the board of directors. I hereby accurately	ept the appo	intment as r	egistered
agent. I a	and accept the obliga	ations of, Section 607.050	was authorized	'nv ine	corporation	's board of directors. I hereby acc	cept the appo	intment as r	egistered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable	was authorized	by the ites.	corporation	i's board of directors. I hereby acc	pept the appo	entment as r	egistered
SIGNATURE	Signature, typed or printed name of registered age: OFFICERS AN	nt and title if applicable.	was authorized 5, Florida Statu (NOTE: Registered A	by the ites. Agent sig	corporation	i's board of directors. I hereby acc	DATE	·	egistered
SIGNATURE 12. TITLE	Signature, typed or printed name of registered ages OFFICERS AN	nt and title if applicable	(NOTE: Registered A	Agent sign	corporation	r's board of directors. I hereby acc	DATE	·	egistered ORS IN 12
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered age: OFFICERS AN PD SMITH, ROBERT G	nt and title if applicable.	(NOTE: Registered A	Agent sign	corporation	r's board of directors. I hereby acc	DATE	ND DIRECT	egistered ORS IN 12
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SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PD SMITH, ROBERT G 445 RED SAIL WAY SATELLITE BEACH FL	nt and title if applicable. ND DIRECTORS	(NOTE: Registered A TE 1.1 TITL 1.2 NAA 1.3 STR 1.4 CID	Agent signer LE ME REET ADD Y-ST-ZIF	nature required v	r's board of directors. I hereby acc	DATE	ND DIRECT	ORS IN 12
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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 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, open an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

FILED

Jan 27, 1999 8:00am

Secretary of State

01-27-1999 90036 002 ***150.00