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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000092232 (3)

RED ROOSTER, INC.

## **FILED** Jan 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							A LOBETORS SEN INDIA NUITE NOTAL NO IL SUE	# <b>4 4 5</b> 1 <b>3 5 6 6 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</b>	PES MIND HOLINGS	
913 WHITE STREET 913 WHITE STREET KEY WEST FL 33040 KEY WEST FL 33040					DO NOT WRITE IN THIS SPACE					
1							3. Date Incorporated or Qualified			
							11/08/1996	<del></del>	<u> </u>	
			Mailing Address				4. FEI Number	_	Applied For	
Suite, Apt.	# elc		Suite, Apt. #, etc.				65-0714876		Not Applicable 75 Additional	
22		27					5. Certificate of Status Desired Fee Required			
City & Stat	e	<del>                                     </del>	28				Election Campaign Financing     Trust Fund Contribution		.00 May Be ded to Fees	
Zip Country					Country					
24	25 29		];	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
CORPORATION SERVICE COMPANY					1   1	Vame		-		
	01 HAYS STREET LLAHASSEE FL 32301-2525					Street Addres	dress (P.O. Box Number is Not Acceptable)			
	EENIAGOEE 1 E GEGOT-EGEG				3		<del></del>		·	
				84	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 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 title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										
12.		ND DIRECTORS	DEL ETE	13.			ADDITIONS/CHANGES TO OFFICE			
TITLE	DPST DURBAN, LESLIE J	Ш	DELETE	1.1 TITLE				☐ Cha	nge L Addition	
NAME	913 WHITE STREET			1.2 NAME		2000				
STREET ADDRESS	KEY WEST FL 33040			1.3 STREE		1				
CITY-ST-ZIP	V		DELETE	1.4 CITY - 2.1 TITLE	_	JP		☐ Cha	nge Addition	
NAME	WILLIAMS, GARY	_		2.2 NAME						
STREET ADDRESS	913 WHITE STREET			2.3 STREE		DRESS				
CITY-ST-ZIP	KEY WEST FL 33040			2. 4 CITY		i i				
TITLE			DELETE	3.1 TITLE	_			☐ Cha	nge Addition	
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREE	T ADD	DRESS				
CITY-ST-ZIP				3.4. CITY-	-ST-2	IP				
TITLE			DELETE	4.1 TITLE				☐ Chai	nge 🔲 Addition	
NAME				4. 2 NAME	1				Ì	
STREET ADDRESS				4.3 STREE	T ADE	DRESS				
CITY-ST-ZIP				4.4 CITY-	ST-21	IP				
TITLE			DELETE	5.1 TITLE				Char	nge 🔲 Addition	
NAME				5.2 NAME		- 1			İ	
STREET ADDRESS				5.3 STREE	T ADD	DAESS			)	
CITY-ST-ZIP				5.4 CITY-	ST-Z	IP .			· · · · · · · · · · · · · · · · · · ·	
TITLE			DELETE	6.1 TITLE		1		∐ Char	nge	
NAME				6.2 NAME						
STREET ADDRESS				6.3 STREE					ļ	
CITY-ST-ZIP		. (a) al. ( . e) .		6.4 CITY-			440 07(0)(0, 5)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
14. I hereby c	entry that the information supplied	with this tiling does h	of drainty for	rrie exemi	OHOL	stated in Se	ection 119.07(3)(i), Florida Statutes. I fu	tritier certify that	trie information	

or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in on an attachment with an address.