2002 Uniform Business Report (UBR)

SIGNATURE:

2002	2 Uniform Busi	NESS REPOR	T (UBR)			LED 2002-8	:00	am	0369641
DOCUMENT # P9800066072 1. Entity Name REDI SOUTH IMPORT & EXPORT, INC.					Apr 02, 2002 8:00 am Secretary of State				
		<u> </u>			04-02-2002 30	0080 021	130.00	•	
•	ce of Business RAL HIGHWAY N FL 33431	Mailing Address 5581 WINSTON PARK BLVD. NO. #208 COCONUT CREEK FL 33073							
	#, etc.	3. Mailing Address 5860 Town V. Suite, Apt. #, etc.	00 Town Bay Drive		DO NOT WRITE IN THIS SPACE				
City & Sta	· · · · · · · · · · · · · · · · · · ·	Boca Raton.	Florida	4.	FEI Number 65-0876330			ed For pplicable	
3348L		33486 U	ountry 1.5 A -		Certificate of Status Desired	☐ Fee R	5 Addition	onal	
	6. Name and Address of Current R	egistered Agent	Name	7. 1	Name and Address of New Re	gistered Agent			
LIRA, REDIVALDO A 5581 WINSTON PARK BLVD.				Street Address (P.O. Box Number is Not Acceptable) 5 8 (60 Town Pocy Dr W					
NO. #208 COCONU	City	3000 Paton FL Zip Code 80							
8. The above	e named entity submits this statement or	the purpose of changing its regis			· • •		<u> </u>	Ψ	
SIGNATURE	Signature, typed or printed name of registered agent ar	d title if applicable. (NOTE: Regis	stered Agent signature requ	uired when n	einstating)	03/26/ DATE	<u>02</u>		
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW!!! FE After May 1, 2002 Fo Make Check Payable to	ee will be \$550.00		Election Campaign Fina Trust Fund Contribution.		\$5.00 Added to		
11.	OFFICERS AND D		12.	AC	DDITIONS/CHANGES TO OFFIC			~~~	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LIRA, REDIVALDO A 5581 WINSTON PA. BLVD. #208 COCONUT CREEK FL 33073				Town Boy Dr Ration. FC 3	7re # 3486	-	Addition	2E034 (9/01)
TITLÉ® NAME STREET ADDRESS	S LIRA, SERGIO A 5581 WINSTON PA. BLVD. #208		TITLE		Town Boy Dr	≯ ₹ 01		Addition	CR2E
CITY-ST-ZIP	COCONUT CREEK FL 33073			ථුණ	a Raton, FL	33436			
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CITY-ST-ZIP TITLE	100		DITY-ST-ZIP		+ r = x - 4 - 1	Ch	anne C	Addition	
NAME STREET ADDRESS CITY-ST-ZIP		; n s	NAME STREET ADDRESS				go]	
TITLE NAME		□ Delete ↑	CITY-ST-ZIP TITLE JAME			Ch	ange [Addition	
STREET ADDRESS CITY-ST-ZIP		c	STREET ADDRESS CITY-ST-ZIP						
13. I hereby of indicated of the corresponded	certify that the information supplied with the on this report or supplemental report is the poration or the receiver or trustee empoyer on an attachment with a position of the receiver or trustee empoyer on an attachment with a position of the control of the co	nis filing does not qualify for the e rue and accurate and that my sig- sered to execute this report as rec	exemption stated in nature shall have th quired by Chapter 6	Section le same l 307, Flori	119.07(3)(i), Florida Statutes. I fo legal effect as if made under oa da Statutes; and that my name :	urther certify that th; that I am an c appears in Block	the inform fficer or of 11 or Blo	mation director ock 12 if	

03/26/02 305-6821655