

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 08, 2001 8:00 am
Secretary of State

03-08-2001 90058 018 ***150.00

DOCUMENT # P99000058277

1. Entity Name
RED FOX, INC.

Principal Place of Business

**5783 S.W. 40TH STREET PMB 205
 MIAMI FL 33155**

Mailing Address

**5783 S.W. 40TH STREET PMB 205
 MIAMI FL 33155**

2. Principal Place of Business

8932 High Point BLV

3. Mailing Address

8932 High Point BLV

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Brooksville

City & State

Brooksville

4. FEI Number

06-5934294

Applied For

Not Applicable

Zip

34613

Country

FL

Zip

34613

Country

FL

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**ROTHBAECHER, ERHARD
 5783 S.W. 40TH STREET PMB 205
 MIAMI FL 33155**

7. Name and Address of New Registered Agent

Name **Erhard Rothbacher**

Street Address (P.O. Box Number is Not Acceptable)

8932 High Point Blv

City

Brooksville

FL

Zip Code

34613

8. 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

Erhard Rothbacher

3.5.01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
 NAME **ROTHBAECHER, ERHARD**
 STREET ADDRESS **5783 S.W. 40TH STREET PMB 205**
 CITY-ST-ZIP **MIAMI FL 33155**

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **Erhard Rothbacher** ☒ Change ☐ Addition
 NAME **President**
 STREET ADDRESS **8932 High Point Blv**
 CITY-ST-ZIP **Brooksville FL 34613**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption indicated on this report or supplemental report is true and accurate and that the signature of the corporation or the receiver or trustee empowered to execute this report as required by section 119.07(3)(i), Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like employees.

**Please
 Sign & Return**

SIGNATURE: **ER Erhard Rothbacher**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3.5.01

Date

352 977 6734

Daytime Phone #

CR2E034 (10/00)