## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 22, 2004 08:00 AM **DOCUMENT # P99000081258** Secretary of State **RED WASP CORPORATION** Mailing Address Principal Place of Business 10564 66TH AVENUE N. 10564 66TH AVENUE N. SEMINOLE, FL 33772 SEMINOLE, FL 33772 CR2E034 (10/03) No Chg-P 02012004 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3598295 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HIGH, JOHN DO NOT WRITE 10564 66TH AVENUE N. SEMINOLE, FL 33772 IN THIS SPACE 8. The above named entity supplies this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and life if applicable \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE HIGH, JOHN U00000034529 NAME 37/22/04-80064-007 150.00 STREET ADDRESS 10564 66TH AVENUE N. CITY-ST-ZIP SEMINOLE, FL 33772 TITLE NAME STREET ADDRESS CITY - ST- ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-712 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP BILE NAME STREET ADDRESS CITY-ST-7/P

12. 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 report or supplemental report is true and accurate another 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 10 or Block 11 if changed, or on an attachment with an address, with all other fike empowered.

CICNIATURE.

NAME STREET ADDRESS CITY-ST-ZIP

late HIGT,

2-8-04

FILED