

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathan
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V46123** (8)

1. Corporation Name

REDMARQ LTD., INC.



Principal Place of Business

**308 PARK AVE., SOUTH
WINTER PARK FL 32789
US**

Mailing Address

**1400 BRIERCLIFF DR.
ORLANDO FL 32806
US**

2. Principal Place of Business

2a. Mailing Address

1401 Arthur Street

Suite, Apt. #, etc.

27

City & State

Orlando FL

Zip

32804

Country

ORANGE

28

City & State

Orlando FL

Zip

32804

Country

ORANGE

29

City & State

Orlando FL

Zip

32804

Country

ORANGE

30

City & State

Orlando FL

Zip

32804

Country

ORANGE

31

City & State

Orlando FL

Zip

32804

Country

ORANGE

32

City & State

Orlando FL

Zip

32804

Country

ORANGE

33

City & State

Orlando FL

Zip

32804

Country

ORANGE

34

City & State

Orlando FL

32804

ORANGE

3. Date Incorporated or Qualified
06/22/1992

3a. Date of Last Report
05/01/1995

4. FEI Number
59-3125997

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name **Eduardo L. Marquez**

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

1401 Arthur Street

83 **Orlando FL**

84 City

FL

85 Zip Code

32804

86

City & State

Orlando FL

Zip

32804

Country

ORANGE

35

City & State

Orlando FL

Zip

32804

Country

ORANGE

36

City & State

Orlando FL

Zip

32804

Country

ORANGE

37

City & State

Orlando FL

Zip

32804

Country

ORANGE

38

City & State

Orlando FL

Zip

32804

Country

ORANGE

39

City & State

Orlando FL

32804

ORANGE

11. Pursuant to the provisions of Section 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

Ed Marquez

Ed Marquez

5/30/96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **DPT**
STREET ADDRESS **MARQUEZ, EDUARDO L.**
CITY - ST - ZIP **1400 BRIERCLIFF DRIVE**
ORLANDO FL 32806

TITLE ☐ DELETE
NAME **DVS**
STREET ADDRESS **REDWINE, MICHAEL S**
CITY - ST - ZIP **1400 BRIERCLIFF DRIVE**
ORLANDO FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME **DPT**
1.3 STREET ADDRESS **Marquez, Eduardo L.**
1.4 CITY - ST - ZIP **1401 Arthur Street**
Orlando FL 32804

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **DVS**
2.3 STREET ADDRESS **Redwine, Michael S**
2.4 CITY - ST - ZIP **1401 Arthur Street**
Orlando FL 32804

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 checked, or on an attachment with an address.

SIGNATURE:

Michael Redwine
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/30/96

407 647 2336

CR2E034 (12/95)