

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jan 13, 2009  
Secretary of State**

DOCUMENT# P02000113386

Entity Name: RONLO ENTERPRISES, INC.

**Current Principal Place of Business:**

17632 FRANJO RD  
MIAMI, FL 33157

**New Principal Place of Business:**

9895 SW 170 ST.  
MIAMI, FL 33157

**Current Mailing Address:**

17632 FRANJO RD  
MIAMI, FL 33157

**New Mailing Address:**

PO BOX 570008  
MIAMI, FL 33257

FEI Number: 06-1689506

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SCHOLER, PAUL J  
17632 FRANJO RD  
MIAMI, FL 33157 US

**Name and Address of New Registered Agent:**

SCHOLER, PAUL J  
9550 SW 182 ST.  
MIAMI, FL 33157 US

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:

Electronic Signature of Registered Agent

01/13/2009

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: SCHOLER, PAUL J  
Address: 17632 FRANJO RD  
City-St-Zip: MIAMI, FL 33157

Title: DV ( ) Delete  
Name: SCHOLER, RONALD W  
Address: 17632 FRANJO RD  
City-St-Zip: MIAMI, FL 33157

Title: DST ( ) Delete  
Name: JORNLD, THOMAS P  
Address: 13401 SW 224 STREET  
City-St-Zip: MIAMI, FL 33170

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: SCHOLER, PAUL J  
Address: 9550 SW 182 ST.  
City-St-Zip: MIAMI, FL 33157

Title: DV (X) Change ( ) Addition  
Name: SCHOLER, RONALD W  
Address: 17435 SW 92 AVE.  
City-St-Zip: MIAMI, FL 33157

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAUL J SCHOLER

Electronic Signature of Signing Officer or Director

DP

01/13/2009

Date