

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 487943

**FILED**  
**Feb 19, 2016**  
**Secretary of State**  
**CC7078265120**

**Entity Name:** ROB-KING ENTERPRISES, INC.

**Current Principal Place of Business:**

3712 BROADWAY  
WEST PALM BEACH, FL 33407

**Current Mailing Address:**

PO BOX 8797  
WEST PALM BEACH, FL 33407

**FEI Number:** 59-1640520

**Certificate of Status Desired:** Yes

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

MORRIS, ROBERT K  
220 CHURCHILL RD.  
WEST PALM BEACH, FL 33405 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

Date

**Officer/Director Detail :**

Title P  
Name MORRIS, ROBERT K  
Address 220 CHURCHILL ROAD  
City-State-Zip: WEST PALM BEACH FL 33405

Title V  
Name MORRIS, ROBERT K  
Address 220 CHURCHILL ROAD  
City-State-Zip: WEST PALM BEACH FL 33405

Title T  
Name MORRIS, PAUL K  
Address 14721 GRANDVIEW  
City-State-Zip: OVERLAND PARK KS

Title S  
Name MORRIS, ROBERT  
Address 220 CHURCHILL ROAD  
City-State-Zip: WEST PALM BEACH FL 33407

*I hereby 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 all other like empowered.*

**SIGNATURE:** ROBERT K. MORRIS

**PRESIDENT**

**02/19/2016**

Electronic Signature of Signing Officer/Director Detail

Date