

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000019867

**Entity Name:** RELIABLE PERMITTING & BUSINESS SUPPORT SERVICES, INC.

**FILED**  
**Apr 21, 2014**  
**Secretary of State**  
**CC2475361459**

**Current Principal Place of Business:**

1631 16TH ST NE  
NAPLES, FL 34120

**Current Mailing Address:**

1631 16TH ST NE  
NAPLES, FL 34120

**FEI Number: 59-3440879**

**Certificate of Status Desired: No**

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

WASHINGTON, SHALONDA  
1631 16TH ST NE  
NAPLES, FL 34120 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 DPST  
Name WASHINGTON, SHALONDA  
Address 1631 16TH ST NE  
City-State-Zip: NAPLES FL 34120

*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: SHALONDA WASHINGTON**

**PRESIDENT**

**04/21/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date