

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000076122

**Entity Name:** RHINO HOLSTERS INC.

**Current Principal Place of Business:**

17294 30TH LANE N.  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

17294 30TH LANE N.  
LOXAHATCHEE, FL 33470 US

**FEI Number: 56-2375804**

**Certificate of Status Desired: No**

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

PLAPPERT, BELKIS MRS  
17294 30TH LANE N.  
LOXAHATCHEE, FL 33470 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            VP  
Name            PLAPPERT, BELKIS MRS  
Address        17294 30TH LANE N.  
City-State-Zip: LOXAHATCHEE FL 33470

Title            P  
Name            PLAPPERT, WILLIAM MR  
Address        17294 30TH LANE N.  
City-State-Zip: LOXAHATCHEE FL 33470

*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: BELKIS PLAPPERT**

**VP**

**04/14/2015**

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

\_\_\_\_\_  
Date