## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# P13000005236

Entity Name: WOLF RETAIL SOLUTIONS I, INC.

# **Current Principal Place of Business:**

4012 GUNN HWY SUITE 200 TAMPA, FL 33618

## **Current Mailing Address:**

4012 GUNN HWY SUITE 200 TAMPA, FL 33618 US

# FEI Number: 46-1799886

### Name and Address of Current Registered Agent:

ROBINSON,, THOMAS PIII 4012 GUNN HWY SUITE 200 TAMPA, FL 33618 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

# Officer/Director Detail ·

| Officer/Director Detail : |                            |                 |                            |  |
|---------------------------|----------------------------|-----------------|----------------------------|--|
| Title                     | PRESIDENT                  | Title           | SECRETARY                  |  |
| Name                      | ROBINSON, THOMAS PIII      | Name            | ROBINSON, ELIZABETH A      |  |
| Address                   | 4012 GUNN HWY<br>SUITE 200 | Address         | 4012 GUNN HWY<br>SUITE 200 |  |
| City-State-Zip:           | TAMPA FL 33618             | City-State-Zip: | TAMPA FL 33618             |  |
| Title                     | CEO                        |                 |                            |  |
| Name                      | ROBINSON, THOMAS PJR       |                 |                            |  |
| Address                   | 4012 GUNN HWY<br>SUITE 200 |                 |                            |  |
| City-State-Zip:           | TAMPA FL 33618             |                 |                            |  |

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: THOMAS ROBINSON

PRESIDENT

01/06/2017

Date

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: Yes

Date