

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F36788

FILED
Jan 06, 2010
Secretary of State

Entity Name: RIMORTWO, INC.

Current Principal Place of Business:

18 VIEW RIDGE LANE
SNOWMASS VILLAGE, CO 81615 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6478
SNOWMASS VILLAGE, CO 81615 US

New Mailing Address:

FEI Number: 59-2130521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLOOM, LEONARD H
ONE FINANCIAL PLAZA #1406
FT LAUDERDALE, FL US

Name and Address of New Registered Agent:

BLOOM, LEONARD H
ONE FINANCIAL PLAZA #1406
FT LAUDERDALE, FL 81615 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:

01/06/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP
Name: COHEN, MORRIS
Address: 18 VIEW RIDGE LANE
City-St-Zip: SNOWMASS VILLAGE, CO 81615 CO

Title: DS
Name: COHEN, RITA
Address: 18 VIEW RIDGE LANE
City-St-Zip: SNOWMASS, CO 81615 CO

Title: N/A
Name: N/A
Address: P.O. BOX 6478
City-St-Zip: SNOWMASS VILLAGE, CO 81615

Title: N/A
Name: N/A
Address: P.O. BOX 6478
City-St-Zip: SNOWMASS VILLAGE, CO 81615

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Title: N/A
Name: N/A
Address: P.O. BOX 6478
City-St-Zip: SNOWMASS VILLAGE, CO 81615

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: MORRIS COHEN

PRES

01/06/2010

Electronic Signature of Signing Officer or Director

Date