

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F81295

Entity Name: GOFORIT, INC.

**FILED**  
**Apr 05, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

34088 US 19 N.  
PALM HARBOR, FL 34684 US

**New Principal Place of Business:**

**Current Mailing Address:**

34088 US 19 N.  
PALM HARBOR, FL 34684 US

**New Mailing Address:**

FEI Number: 59-2194093

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GOLDMAN, RONNIE  
2689 SAXONY CT. W.  
CLEARWATER, FL 33761 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GOLDMAN, EUGENE  
Address: 34088 U.S. HWY 19 NORTH  
City-St-Zip: PALM HARBOR, FL 34684 US

Title: STD  
Name: GOLDMAN, RONNIE  
Address: 34088 U.S. HWY 19 NORTH  
City-St-Zip: PALM HARBOR, FL 34684 US

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: RONNIE GOLDMAN

STD

04/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date