

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L87043

FILED
May 01, 2012
Secretary of State

Entity Name: STUDIO R.K., INC.

Current Principal Place of Business:

6420 PLANTATION PK CT
STE 102
FORT MYERS, FL 33966

New Principal Place of Business:

Current Mailing Address:

6420 PLANTATION PK CT
STE 102
FORT MYERS, FL 33966

New Mailing Address:

FEI Number: 65-0218849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEUER KAREN
6420 PLANTATION PK CT
STE 102
FORT MYERS, FL 33966 US

Name and Address of New Registered Agent:

PAMELA KNIGHT
6420 PLANTATION PK CT
STE 102
FORT MYERS, FL 33966 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: PAMELA KNIGHT

05/01/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: OWNR
Name: PAGNUTTI, JENNIFER
Address: 6420 PLANTATION PK CT STE 102
City-St-Zip: FORT MYERS, FL 33966

Title: OWNR
Name: KNIGHT, PAMELA
Address: 6420 PLANTATION PK CT STE 102
City-St-Zip: FORT MYERS, FL 33966

Title: OWNR
Name: MARSH, DEBORAH
Address: 6420 PLANTATION PK CT STE 102
City-St-Zip: FORT MYERS, FL 33966

Title: PT
Name: WALKER, RENEE
Address: 6420 PLANTATION PK CT STE 102
City-St-Zip: FORT MYERS, FL 33966

Title: VS
Name: STEUBER, KAREN
Address: 6420 PLANTATION PK CT STE 102
City-St-Zip: FORT MYERS, FL 33966

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: PAMELA KNIGHT

OWNR

05/01/2012

Electronic Signature of Signing Officer or Director

Date