

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90290 017 ***150.00

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04122005 Chg-P CR2E034 (10/03)

4. FEI Number 65-1023796 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # P00000032347

1. Entity Name
RLS ENTERTAINMENT, INC.



Principal Place of Business 5721 NE 21ST RD.
FORT LAUDERDALE, FL 33308

Mailing Address 2154 N.E. 56 PLACE4
FORT LAUDERDALE, FL 33308

2. Principal Place of Business
To John H Hull
Suite, Apt. #, etc.
5714 Coco Palm Dr.
City & State
TAMARAC, FL
Zip 33319 Country USA

3. Mailing Address
To John H. Hull
Suite, Apt. #, etc.
5714 Coco Palm Dr.
City & State
TAMARAC, FL
Zip 33319 Country

6. Name and Address of Current Registered Agent
SAUER, RONALD
5721 NE 21 ROAD
FORT LAUDERDALE, FL 33308

7. Name and Address of New Registered Agent
Name SAUER, RONALD
Street Address (P.O. Box Number is Not Acceptable)
171 S.E. 9 ST.
City POMPAHO BEACH FL Zip Code 33060

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE DATE X 4-14-05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAUER, RONALD L 5721 N.E. 21ST ROAD FORT LAUDERDALE, FL 33308 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAUER, RONALD L 171 S.E. 9 ST. POMPAHO BEACH, FL 33060 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes; I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: DATE RONALD L. SAUER X 4-14-05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR