

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P01000047225

1. Entity Name
RSTWDI, INC.



Principal Place of Business
3825 37TH STREET
E
PALMETTO, FL 34221

Mailing Address
3825 37TH STREET
E
PALMETTO, FL 34221



02072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3728727

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SAURI, CYNTHIA M
3825 37TH ST
SUITE E
PALMETTO, FL 34221

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IN THIS SPACE**

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

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SOLUIL, CYNTHIA
SUBJECT ADDRESS	3825 37TH ST, SUITE E
CITY-STATE-ZIP	PALMETTO, FL 34221
TITLE	STD
NAME	SOLURI, RODGER T
SUBJECT ADDRESS	3825 37TH ST, SUITE E
CITY-STATE-ZIP	PALMETTO, FL 34221
TITLE	
NAME	
SUBJECT ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
SUBJECT ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
SUBJECT ADDRESS	
CITY-STATE-ZIP	

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05/21/08-80029-025 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 duly empowered.

SIGNATURE:

Cynthia Soluri
Cynthia Soluri
President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #