


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 15, 2008 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # P01000086840 1. Entity Name R. PINNACLE CO. |  |
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| Principal Place of Business 4 OCEANS WEST BLVD., UNIT 804D DAYTONA BEACH, FL 32118 | Mailing Address 4 OCEANS WEST BLVD., UNIT 804D DAYTONA BEACH, FL 32118 |
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02122008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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|-----------------------------|-------------------------------|
| 4. FEI Number 59-3743803 | Applied For Not Applicable |
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REZENDE, FRANK
4 OCEANS WEST BLVD., UNIT 804-D
DAYTONA BEACH, FL 32118

**DO NOT WRITE
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 instituting) DATE _____

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | 1000000828598 02/26/08-80008-006 150.00 |
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| 10. OFFICERS AND DIRECTORS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D REZENDE, CAROL 4 OCEANS WEST BLVD., UNIT 804D DAYTONA BEACH, FL 32118 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D REZENDE, FRANK 4 OCEANS WEST BLVD., UNIT 804D DAYTONA BEACH, FL 32118 |
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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 like empowered.

SIGNATURE: Frank Rezend Frank Rezend 2-12-08 767-974-4566
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAYTIME PHONE #