

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000112146

FILED
Apr 25, 2012
Secretary of State

Entity Name: RETRACTABLEAWNINGS.COM, INC.

Current Principal Place of Business:

16255 NW 54 AVENUE
MIAMI, FL 33014 US

New Principal Place of Business:

5160 NW 165 STREET
MIAMI, FL 33014 US

Current Mailing Address:

16255 NW 54 AVENUE
MIAMI, FL 33014 US

New Mailing Address:

5160 NW 165 STREET
MIAMI, FL 33014 US

FEI Number: 54-2100815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCOP, MORRIS D
16255 NW 54 AVENUE
MIAMI, FL 33014 US

Name and Address of New Registered Agent:

SCOP, MORRIS D
5160 NW 165 STREET
MIAMI, FL 33014 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:

Electronic Signature of Registered Agent

04/25/2012

Date

OFFICERS AND DIRECTORS:

Title: V
Name: CLAVELO, ORESTES MR
Address: 5160 NW 165 STREET
City-St-Zip: MIAMI, FL 33014 US

Title: P
Name: SCOP, MORRIS D MR
Address: 5160 NW 165 STREET
City-St-Zip: MIAMI, FL 33014 US

Title: V
Name: SCOP, IVOR C MR
Address: 5160 NW 165 STREET
City-St-Zip: MIAMI, FL 33014 US

Title: V
Name: SCOP, ERIC M MR
Address: 5160 NW 165 STREET
City-St-Zip: MIAMI, FL 33014 US

Title: S
Name: SCOP, MOLLY M MS.
Address: 5160 NW 165 STREET
City-St-Zip: MIAMI, FL 33014 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: IVOR SCOP

Electronic Signature of Signing Officer or Director

VP

04/25/2012

Date