2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000087924

Entity Name: R.K./FL MANAGEMENT, INC.

FILED Jan 28, 2009 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place of	New Principal Place of Business:	
	LLINS AVE ST SLES BCH, FL				
Current N	lailing Addre	ss:	New Mailing Address:	New Mailing Address:	
	LLINS AVE ST SLES BCH, FL				
FEI Number	: 74-3147783	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of	Current Registered Agent:	Name and Address of	New Registered Agent:	
	NIEL LLINS AVE ST SLES BCH, FL				
	e named entity e of Florida.	submits this statement for th	e purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agen			Agent	Date	
Election Ca	mpaign Financir	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KATZ, RAANAI 1770 COLLINS		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	KATZ, DANIEL 1770 COLLINS		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	KATZ, DAVID 1770 COLLINS) Delete S AVE ST 225 BEACH, FL 33160	Title: (Name: Address: City-St-Zip:) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVID KATZ VP 01/28/2009