

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000035008

Entity Name: ROBIN S. WILLIAMS, INC.

FILED  
Apr 11, 2011  
Secretary of State

**Current Principal Place of Business:**

19220 N W 5TH CT  
MIAMI, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

19220 N W 5TH CT  
MIAMI, FL 33169

**New Mailing Address:**

FEI Number: 26-4608583

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WILLIAMS, ROBIN S  
19220 N W 5TH CT  
MIAMI, FL 33169 US

**Name and Address of New Registered Agent:**

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

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WILLIAMS, ROBIN S  
Address: PO BOX 695419  
City-St-Zip: MIAMI, FL 33269

Title: D  
Name: WILLIAMS, RUFUS  
Address: PO BOX 695419  
City-St-Zip: MIAMI, FL 33269

Title: D  
Name: WILLIAMS, ALYSIA  
Address: PO BOX 695419  
City-St-Zip: MIAMI, FL 33269

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: ROBIN S. WILLIAMS

DIRE

04/11/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date