

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000020590

FILED  
May 01, 2012  
Secretary of State

**Entity Name:** RNK ENTERTAINMENT AND MANAGEMENT INC.

**Current Principal Place of Business:**

4109 PITCH PINE CIRCLE  
OVIEDO, FL 32765 US

**New Principal Place of Business:**

**Current Mailing Address:**

4109 PITCH PINE CIRCLE  
OVIEDO, FL 32765 US

**New Mailing Address:**

1067 BRIELLE CT  
OVIEDO, FL 32765 US

**FEI Number:** 45-4024095

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAK COURT  
SUITE A  
TAMPA, FL 33612 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:** P, T  
**Name:** NETTLES, RONALD  
**Address:** 4109 PITCH PINE CIRCLE  
**City-St-Zip:** OVIEDO, FL 32765 US

**Title:** D  
**Name:** NETTLES, RONALD  
**Address:** 4109 PITCH PINE CIRCLE  
**City-St-Zip:** OVIEDO, FL 32765 US

**Title:** P, S  
**Name:** ELISTIN, KENY  
**Address:** 4109 PITCH PINE CIRCLE  
**City-St-Zip:** OVIEDO, FL 32765 US

**Title:** D  
**Name:** ELISTIN, KENY  
**Address:** 4109 PITCH PINE CIRCLE  
**City-St-Zip:** OVIEDO, FL 32765 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:** RONALD NETTLES

PRES

05/01/2012

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

\_\_\_\_\_  
Date