

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000033137

Entity Name: RTS DISTRIBUTING INC

**FILED**  
**Apr 27, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

391 NORTH MAIN STREET  
KISSIMMEE, FL 34744

**New Principal Place of Business:**

944 MELBA ST  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

391 NORTH MAIN STREET  
KISSIMMEE, FL 34744

**New Mailing Address:**

944 MELBA ST  
JACKSONVILLE, FL 32205

FEI Number: 90-0679704

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STIEKMAN, ANDREW M  
391 NORTH MAIN STREET  
KISSIMMEE, FL 34744 US

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

STIEKMAN, ANDREW M  
944 MELBA ST  
JACKSONVILLE, FL 32205 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:

04/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: STIEKMAN, ANDREW M  
Address: 944 MELBA ST  
City-St-Zip: JACKSONVILLE, FL 32205

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: ANDREW STIEKMAN

PRES

04/27/2012

Electronic Signature of Signing Officer or Director

Date