

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P93000020119

**Entity Name:** RETAIL SERVICES, INC.

**FILED**  
**Apr 11, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

1544 BLOOMINGDALE AVENUE  
VALRICO, FL 33596 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 6220  
BRANDON, FL 33508 US

**New Mailing Address:**

**FEI Number:** 59-3171320

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BEAVER, SHARI  
1141 MYRTLE RD  
VALRICO, FL 33596 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:** PD  
**Name:** BEAVER, DAVID M  
**Address:** 1141 MYRTLE RD  
**City-St-Zip:** VALRICO, FL 33596

**Title:** CEO  
**Name:** BEAVER, SHARI M  
**Address:** 1141 MYRTLE RD  
**City-St-Zip:** VALRICO, FL 33596

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:** SHARI BEAVER

CEO

04/11/2011

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

\_\_\_\_\_  
Date