## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000028712

Entity Name: RAINA IMAGING, INC.

FILED Jan 09, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

13128 QUINCY BAY DR. JACKSONVILLE, FL 32224 US

Current Mailing Address: New Mailing Address:

450.106 SR 13N 263 JACKSONVILLE, FL 32259

FEI Number: 59-3443108 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

SMITH, SAMUEL N 13128 QUINCY BAY DRIVE JACKSONVILLE, FL 32224 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PS

Name: SMITH, ROSANNA L

Address: 14286 19 BEACH BLVD STE 364 City-St-Zip: JACKSONVILLE, FL 32250

Title:

Name: SMITH, SAMUEL N

Address: 14286 19 BEACH BLVD STE 364 City-St-Zip: JACKSONVILLE, FL 32250

Title: VPT

Name: PANKEY, KIMBERLY
Address: 544 S. BRIDGE CREEK DR.
City-St-Zip: JACKSONVILLE, FL 32259

Title: [

Name: PANKEY, STEVEN

Address: 544 S. BRIDGE CREEK DR. City-St-Zip: JACKSONVILLE, FL 32259

Title: F

Name: SMITH, ROSANNA L
Address: 13128 QUINCY BAY DR
City-St-Zip: JACKSONVILLE, FL 32224

Title:

Name: SMITH, SAMUEL N
Address: 13128 QUINCY BAY DR
City-St-Zip: JACKSONVILLE, FL 32224

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: KIMBERLY A. PANKEY VPT 01/09/2012