

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028853

Entity Name: R.B. KNOT, INC.

FILED  
May 01, 2008  
Secretary of State

## Current Principal Place of Business:

1421 AVON LANE  
206  
NORTH LAUDERDALE, FL 33068

## New Principal Place of Business:

## Current Mailing Address:

1421 AVON LANE  
206  
NORTH LAUDERDALE, FL 33068

## New Mailing Address:

FEI Number: 65-0740645

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ARBUTHNOT, PAULETTE  
1421 AVON LANE  
206  
NORTH LAUDERDALE, FL 33068 US

## Name and Address of New Registered Agent:

THOMPSON, PAULETTE  
1421 AVON LANE  
206  
NORTH LAUDERDALE, FL 33068 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: PAULETTE THOMPSON

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ARBUTHNOT, PAULETTE  
Address: 1421 AVON LANE, SUITE 206  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: VP ( ) Delete  
Name: ARBUTHNOT, MICHAEL J  
Address: 935 DOGWOOD DRIVE  
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP ( ) Delete  
Name: BLAKE, KIMBERLY D  
Address: 971 SW 82ND TERRACE  
City-St-Zip: NORTH LAUDERDALE, FL 33068

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: THOMPSON, PAULETTE  
Address: 1421 AVON LANE, SUITE 206  
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PAULETTE THOMPSON

PRES

05/01/2008

Electronic Signature of Signing Officer or Director

Date