

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000017613

**Entity Name:** RN CUSTOM CLOSETS & GLASS, INC.

**Current Principal Place of Business:**

4370 12TH STREET NE  
NAPLES, FL 34117

**Current Mailing Address:**

PO BOX 8095  
NAPLES, FL 34101

**FEI Number:** 20-0636890

**Certificate of Status Desired:** No

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

NUNO, RENIER  
330 16TH STREET SE  
NAPLES, FL 34117 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

**Officer/Director Detail :**

Title	P	Title	VP
Name	NUNO, RENIER	Name	MAXWELL, KIMBERLY L
Address	330 16TH STREET SE	Address	5685 WHITAKER ROAD #C202
City-State-Zip:	NAPLES FL 34117	City-State-Zip:	NAPLES FL 34112

*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:** RENIER NUNO

**PRESIDENT**

**05/01/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date