

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000001371

**FILED**  
**Mar 06, 2018**  
**Secretary of State**  
**CC9270218625**

**Entity Name:** DRAKEN INTERNATIONAL, INC.

**Current Principal Place of Business:**

3330 FLIGHTLINE DRIVE  
LAKELAND, FL 33811

**Current Mailing Address:**

3330 FLIGHTLINE DRIVE  
LAKELAND, FL 33811

**FEI Number:** 45-4072151

**Certificate of Status Desired:** Yes

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

NRAI SERVICES, INC  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 CP  
Name ISAACMAN, JARED  
Address 12 TOW LINE DRIVE  
City-State-Zip: WASHINGTON NJ 07882

Title DS  
Name FRANKEL, JORDAN  
Address 12 TOW LINE DRIVE  
City-State-Zip: WASHINGTON NJ 07882

Title DVP  
Name GUSTAFSON, SEAN  
Address 12 TOW LINE DRIVE  
City-State-Zip: WASHINGTON NJ 07882

Title T  
Name SNODGRASS, DALE  
Address 12 TOW LINE DRIVE  
City-State-Zip: WASHINGTON NJ 07882

Title D  
Name KERBY, JERRY  
Address 12 TOW LINE DRIVE  
City-State-Zip: WASHINGTON NJ 07882

Title DVP  
Name BAUM, JOHN  
Address 12 TOW LINE DRIVE  
City-State-Zip: WASHINGTON NJ 07882

Title DIRECTOR  
Name PARISI, MARIO V JR.  
Address 12 TOW LINE DRIVE  
City-State-Zip: WASHINGTON NJ 07882

Title DIRECTOR  
Name KLEINHENDLER, HOWARD  
Address 12 TOW LINE DRIVE  
City-State-Zip: WASHINGTON NJ 07882

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*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:** JORDAN FRANKEL

**SECRETARY**

**03/06/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            VIGILANTE, JAMES J  
Address        12 TOW LINE DRIVE  
City-State-Zip: WASHINGTON NJ 07882