

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000029031

Entity Name: ALGODIMENSIONS INC

FILED  
Apr 30, 2012  
Secretary of State

**Current Principal Place of Business:**

734 RIVERBEND BLVD.  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

734 RIVERBEND BLVD.  
LONGWOOD, FL 32779

**New Mailing Address:**

FEI Number: 45-1554354

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

COFNAS, ABE  
734 RIVERBEND BLVD.  
LONGWOOD, FL 32779 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: MR  
Name: COFNAS, ABE  
Address: 734 RIVERBEND BLVD.  
City-St-Zip: LONGWOOD, FL 32779

Title: MR.  
Name: REESE, DEAN  
Address: 1345 MAGNOLIA PARK CIRCLE  
City-St-Zip: CUMMINGS, GA 30040

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: ABRAHAM COFNAS

MR.

04/30/2012

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

\_\_\_\_\_ Date