

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000011777

**Entity Name:** EMGAGE ACTION, INC.

**Current Principal Place of Business:**

3425 US HWY 98 NORTH  
LAKELAND, FL 33809

**Current Mailing Address:**

3425 US HWY 98 NORTH  
LAKELAND, FL 33809

**FEI Number:** 46-5499822

**Certificate of Status Desired:** No

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

MITHA, AMIN  
3425 US HWY 98 NORTH  
LAKELAND, FL 33809 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 DIR  
Name KHURRUM, WAHID  
Address 3425 US HWY 98 NORTH  
City-State-Zip: LAKELAND` FL 33809

Title DIRECTOR  
Name ABDALMAJID, KATRANJI  
Address 3425 US HWY 98 NORTH  
City-State-Zip: LAKELAND FL 33809

Title TREASURER  
Name MITHA, AMINMOHAMED  
Address 3425 US HWY 98 NORTH  
City-State-Zip: LAKELAND FL 33809

Title DIRECTOR  
Name ILYAS, ASIF  
Address 3425 US HWY 98 NORTH  
City-State-Zip: LAKELAND FL 33809

*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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AMINMOHAMED MITHA

**TREASURER**

**04/09/2023**

Electronic Signature of Signing Officer/Director Detail

Date