

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N12000006296

**Entity Name:** SOME INC.

**Current Principal Place of Business:**

4047 SUBURBAN LANE  
NORT PORT, FL 34287

**Current Mailing Address:**

13624 TAMIAMI TRAIL  
# 164  
NORT PORT, FL 34287 US

**FEI Number:** 45-5594683

**Certificate of Status Desired:** No

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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 PD  
Name SEGAL, JAY  
Address 9785 PINEAPPLE TREE DRIVE  
#101  
City-State-Zip: BOYNTON BEACH FL 33436

Title STD  
Name SEGAL, ANDREA  
Address 13624 TAMIAMI TRAIL  
# 164  
City-State-Zip: NORT PORT FL 34287

Title VP, DIRECTOR  
Name EHEART, MILLARD  
Address 4047 SUBURBAN LANE  
City-State-Zip: NORT PORT FL 34287

*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:** MILLARD EHEART

VP/DIRECTOR

01/19/2015

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

\_\_\_\_\_  
Date