

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16000003771

Entity Name: SOBE CATS SPAY & NEUTER, INC.**Current Principal Place of Business:**1012 16TH STREET
MIAMI BEACH, FL 33139**Current Mailing Address:**1012 16TH STREET
MIAMI BEACH, FL 33139 US**FEI Number: 81-2263038****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**THINGELSTAD, MARY A
1012 16TH STREET
MIAMI BEACH, FL 33139 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 PRESIDENT, TREASURER
Name THINGELSTAD, MARY A
Address 1012 16TH STREET
City-State-Zip: MIAMI BEACH FL 33139

Title VP, DIRECTOR
Name LEE, DEENA
Address 309 E DILIDO DRIVE
City-State-Zip: MIAMI BEACH FL 33139

Title SECRETARY, DIRECTOR
Name DIAMOND, LINDA
Address 428 CHILDERS STREET #24180
City-State-Zip: PENSACOLA FL 32534

Title DIRECTOR
Name JACKSON, CELYTA
Address 439 15TH STREET UNIT 1
City-State-Zip: MIAMI BEACH FL 33139

Title DIRECTOR
Name BIESENBACH, LUCY
Address 4519 ROYAL PALM AVE
City-State-Zip: MIAMI BEACH FL 33140

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: DEENA LEE**VP, DIRECTOR****03/03/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date