

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000065708

**Entity Name:** ANNARAK, INC.

**Current Principal Place of Business:**

1802 STARGAZER TRAIL  
KISSIMMEE, FL 34758

**Current Mailing Address:**

PO BOX 1089  
INTERCESSION CITY, FL 33848 US

**FEI Number:** 27-3223520

**Certificate of Status Desired:** No

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

IDEAL OPPORTUNITIES, INC.  
1802 STARGAZER TRAIL  
KISSIMMEE, FL 34758 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            P  
Name            DEVID, CONRAD R  
Address        PO BOX 1089  
City-State-Zip: INTERCESSION CITY FL 33848

Title            VP  
Name            LENS, HENDRINA  
Address        PO BOX 1089  
City-State-Zip: INTERCESSION CITY FL 33848

*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:** DEVID , CONRAD R

**PRESIDENT**

**04/26/2017**

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

\_\_\_\_\_  
Date