2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

2008 APR 18 PM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F06000003508

1. Entity Name
KIDINME CORPORATION

Principal Place of Business	Mailing Address
% SHERIN AND LODGEN LLP 101 FEDERAL STREET, 30TH FLOOR BOSTON, MA 02110	% SHERIN AND LODGEN LLP 101 FEDERAL STREET, 30TH FLOOR BOSTON, MA 02110

04172008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4124807
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CHRM
NAME	WOBBE, RUSSEL
STREET ADDRESS	POSTNET SUITE 393, PRIVATE BAG X033
CITY-ST-ZIP	RIVONIA, 2121. SOUTH AFRICA,
TITLE	PT
NAME	WOBBE, RUSSEL
STREET ADDRESS	POSTNET SUITE 393, PRIVATE BAG X033
CITY-ST-ZIP	RIVONIA, 212. SOUTH AFRICA,
TITLE	D
NAME	BUCHMAN, GARY
STREET ADDRESS	C/O SHERIN AND LODGEEN LLP, 101 FEDERAL ST
CITY-ST-ZIP	BOSTON, MA 02110
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/18/08--01009--008 **150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Gary Buchman Secretary GARY BUCHMAN, SECRETARY 4/17/08 6176462204
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

4183