

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N05000004251

1. Entity Name
THE INDEEDIAM CORPORATION



Principal Place of Business
843 SW 154TH PATH
MIAMI, FL 33194

Mailing Address
PO BOX 940481
MIAMI, FL 33194

FILED

07 MAR 23 AM 11:13

CLERK OF STATE
TALLAHASSEE, FLORIDA



01132007 No Chg-NP

CR2E037 (4/06)

4. FEI Number
42-1659797

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LANG, GLORIA A
843 SW 154TH PATH
MIAMI, FL 33194

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CEO
LANG, GLORIA A
PO BOX 940481
MIAMI, FL 33194

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AD
ESCOBAR, LUIS
PO BOX 940481
MIAMI, FL 33194

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

\$13/29

03/23/07-00000010 61.25

400095884234
04/05/07-01029-018 **61.75

**DO NOT WRITE
IN THIS SPACE**

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 617, 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:

Gloria A. Lang

8 Mar 07

305-223-7938

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #