

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000028652

Entity Name: INKOLOGY, INC.

FILED
Apr 09, 2009
Secretary of State

Current Principal Place of Business:

10604 WHEELHOUSE CIRCLE
BOCA RATON, FL 33428

New Principal Place of Business:

10 FAIRWAY DRIVE
304
DEERFIELD BEACH, F 33441

Current Mailing Address:

10604 WHEELHOUSE CIRCLE
BOCA RATON, FL 33428

New Mailing Address:

10 FAIRWAY DRIVE
304
DEERFIELD BEACH, F 33441

FEI Number: 02-0564651

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILBERMAN, BARRY
10604 WHEELHOUSE CIRCLE
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SILBERMAN, BARRY
Address: 10604 WHEELHOUSE CIR.
City-St-Zip: BOCA RATON, FL 33428

Title: VP () Delete
Name: SILBERMAN, LESLIE
Address: 10604 WHEELHOUSE CIR.
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BARRY SILBERMAN

PRES

04/09/2009

Electronic Signature of Signing Officer or Director

Date