

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 30, 2007 8:00 am
Secretary of State

07-30-2007 90092 001 ***300.00

DOCUMENT # P02000131365

1. Entity Name
INDUNA, INC.



Principal Place of Business
**2200 NE 66TH ST #1412
FT LAUDERDALE, FL 33308**

Mailing Address
**2200 NE 66TH ST #1412
FT LAUDERDALE, FL 33308**

66020680

2. Principal Place of Business - No P.O. Box #
700 N RIVERSIDE DRIVE

3. Mailing Address
700 N RIVERSIDE DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

05162007

Chg-P

CR2E034 (12/06)

City & State
POMPANO BEACH, FL

City & State
POMPANO BEACH, FL

4. FEI Number
30-0146632

Applied For
Not Applicable

Zip
33062

Country
USA

Zip
33062

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MICHAEL C. KLASFELD, P.A.
2424 NE 22ND ST
POMPANO BCH, FL 33062**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TPST
GREENSTEIN, THELMA T
2200 NE 66TH ST #1412
FT LAUDERDALE, FL 33308** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
GREENSTEIN, THELMA T
2200 NE 66TH ST #1412
FT LAUDERDALE, FL 33308** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
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CITY - ST - ZIP
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☐ Change ☐ Addition

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:

Thelma Greenstein

THELMA GREENSTEIN

7/17/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #