

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000053794

Entity Name: SOMETHING IDEAL, INC.

FILED
Apr 16, 2007
Secretary of State

Current Principal Place of Business:

100 BAYVIEW DR., STE 2028
NORTH MIAMI BEACH, FL 33160

New Principal Place of Business:

68 GREENPOINT AVE.
4
BROOKLYN, NY 11222 US

Current Mailing Address:

100 BAYVIEW DR., STE 2028
NORTH MIAMI BEACH, FL 33160

New Mailing Address:

19333 COLLINS AVE
410
NORTH MIAMI BEACH, FL 33160

FEI Number: 51-0468868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIAMI CORPORATE SYSTEMS, INC.
283 CATALONIA AVE, 2ND FL
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

GOLDFARB KUSCHNIR, DAVID
283 CATALONIA AVE, 2ND FL
CORAL GABLES, FL 33134 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: ESQUENAZI

04/16/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KUSCHNIR, ARI
Address: 56 SPRING ST #2
City-St-Zip: NEW YORK, NY 10012

Title: DVP () Delete
Name: THRIFT, SCOTT
Address: 56 SPRING ST #2
City-St-Zip: NEW YORK, NY 10012

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: KUSCHNIR, ARI
Address: 68 GREENPOINT AVE. #4
City-St-Zip: BROOKLYN, NY 11222

Title: DVP (X) Change () Addition
Name: THRIFT, SCOTT
Address: 68 GREENPOINT AVE. #4
City-St-Zip: BROOKLYN, NY 11222

I hereby certify that the information supplied with this filing does not qualify for the 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: ARI KUSCHNIR

DP

04/16/2007

Electronic Signature of Signing Officer or Director

Date