## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000079103

Entity Name: CORAL COMPANIONS INC.

FILED Apr 18, 2009 Secretary of State

| Current Principal Place of Business:   | New Principal Place of Business:                              |
|--|---|
| 1515 UNIVERSITY DR<br>106<br>CORAL SPRINGS, FL 33071   | 10100 W SAMPLE RD<br>407<br>CORAL SPRINGS, FL 33065           |
| Current Mailing Address:   | New Mailing Address:  |
| 1515 UNIVERSITY DR<br>106<br>CORAL SPRINGS, FL 33071   | 10100 W SAMPLE RD<br>407<br>CORAL SPRINGS, FL 33065           |
| FEI Number: 90-0183187 FEI Number Applied For ( ) FEI Number   | mber Not Applicable ( ) Certificate of Status Desired ( )     |
| Name and Address of Current Registered Agent:  | Name and Address of New Registered Agent:                     |
| YOUSEFI, DIANE<br>1515 UNIVERSITY DR<br>106<br>CORAL SPRINGS, FL 33071 US  | YOUSEFI, DIANE<br>6273 NW 52 ST<br>CORAL SPRINGS, FL 33067 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: DIANE L YOUSEFI   | 04/18/2009  |
| Electronic Signature of Registered Agent   | Date  |
| Election Campaign Financing Trust Fund Contribution ( ).   |   |

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

DPVP Title: Title: ( ) Delete () Change () Addition YOUSEFI, DIANE Name: Name: 6273 NW 52 ST Address: Address: City-St-Zip: CORAL SPRINGS, FL 33067 City-St-Zip:

Title: () Delete Title: () Change () Addition

YOUSEFI, DIANE Name: Name: Address: 6273 NW 52 ST Address: CORAL SPRINGS, FL 33067 City-St-Zip: 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: DIANE L YOUSEFI **PRES** 04/18/2009