2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000128133

Entity Name: INDIGOS FRANCHISING, INC.

FILED Jan 07, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1680 LYONS TECHNOLOGY CIRCLE 6810 LYONS TECHNOLOGY CIRCLE

SUITE 180 SUITE 165
COCONUT CREEK, FL 33073 US COCONUT CREEK, FL 33073 US

Current Mailing Address: New Mailing Address:

6810 LYONS TECHNOLOGY CIRCLE 6810 LYONS TECHNOLOGY CIRCLE SUITE 180 SUITE 165
COCONUT CREEK, FL 33073 US COCONUT CREEK, FL 33073 US

FEI Number: 20-1604784 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

TOLLEFSON, BRIAN 21551 ARBOR WAY BOCA RATON, FL 33433 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: TOLLEFSON, BRIAN Name: TOLLEFSON, BRIAN

Address: 6810 LYONS TECHNOLOGY CIRCLE SUITE 180 Address: 6810 LYONS TECHNOLOGY CIRCLE SUITE 165

City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: COCONUT CREEK, FL 33073 US

Title: VP () Delete Title: VP (X) Change () Addition

Name: PUCCIO, MICHAEL Name: PUCCIO, MICHAEL

Address: 6810 LYONS TECHNOLOGY CIRCLE SUITE 180 Address: 6810 LYONS TECHNOLOGY CIRCLE SUITE 165

City-St-Zip: COCONUT CREEK, FL 33073 US City-St-Zip: COCONUT CREEK, FL 33073 US

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: MIKE PUCCIO VP 01/07/2008