

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90058 046 ***150.00

DOCUMENT # P07000004307 Entity Name IND A COMPANION, INCORPORATED			
Principal Place of Business 334 SUNSHINE DRIVE COCONUT CREEK, FL 33066		Mailing Address 334 SUNSHINE DRIVE COCONUT CREEK, FL 33066	
2. Principal Place of Business - No P.O. Box # 334 Sunshine Dr.		3. Mailing Address 334 Sunshine Dr.	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Coconut Creek FL		City & State FL 33066	
Zip 33066		Zip 33066	
Country U.S.		Country U.S.	
4. FEI Number 		Applied For ☒ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HUGUE, SHARMEEN 334 SUNSHINE DRIVE COCONUT CREEK, FL 33066		7. Name and Address of New Registered Agent Name N/A Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HUGUE, SHARMEEN 334 SUNSHINE DRIVE COCONUT CREEK, FL 33066 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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 embossed.			
SIGNATURE: Sharmeen Hugue SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 03/07/08 Daytime Phone #	

ATTACHMENT

40061529

#P07000004307

03/07/07

To whom it may concern:

Please resolve Find A
Companion, Inc. as of 01/03/07.

If you have any questions,
please call or correspond mail.

954-607-0447

334 Sunshine Drive
Coconut Creek, FL 33066

Thank you.

Sharmen Lopez