

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008 08:00 AM
Secretary of State

DOCUMENT # P94000001807

1. Entity Name
NEKO, INC. AMERICAN



Principal Place of Business
3427 RECKER HIGHWAY
WINTER HAVEN, FL 33881

Mailing Address
3427 RECKER HIGHWAY
WINTER HAVEN, FL 33881



04172008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3236179

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SIDWELL, GLEN
3427 RECKER HIGHWAY
WINTER HAVEN, FL 33880

**DO NOT WRITE
IN THIS SPACE**

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
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U000000906014
05/02/08-80005-013 150.00

10. OFFICERS AND DIRECTORS

TITLE PD
NAME SIDWELL, GLEN
STREET ADDRESS 1584 N LAKE SHIPP DR
CITY-ST-ZIP WINTER HAVEN, FL

TITLE VTD
NAME SIDWELL, MICHAEL
STREET ADDRESS 3010 MISSION OAK TR.
CITY-ST-ZIP BARTOW, FL 33830

TITLE VD
NAME SIDWELL, CONNIE
STREET ADDRESS 3010 MISSION OAKS TR
CITY-ST-ZIP WINTER HAVEN, FL 33880

TITLE VSD
NAME SIDWELL, TARESSA
STREET ADDRESS 1584 N LAKE SHIPP DR
CITY-ST-ZIP WINTER HAVEN, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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 *Taressa Sidwell*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/08 863 299
3695
Date Daytime Phone #