

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000049159

Entity Name: THINAMI INC.

FILED
Jul 31, 2008
Secretary of State

Current Principal Place of Business:

1680 A1A HWY
SUITE #5
SATELLITE BEACH, FL

New Principal Place of Business:

1680 A1A HWY
SUITE #5
SATELLITE BEACH, FL 32937

Current Mailing Address:

C/O RALPH SMITH
BOX 410485
MELBOURNE, FL 32941 US

New Mailing Address:

FEI Number: 59-3260033 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, RALPH
1680 A1A HWY
SATELLITE BEACH, FL 32937 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SMITH, RALPH
Address: 1680 HWY A1A
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D () Delete
Name: SMITH, CODY
Address: 1680 HWY A1A
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: RALPH SMITH

D

07/31/2008

Electronic Signature of Signing Officer or Director

Date