

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000062631

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: NEMAC INDUSTRIES, INC.

**Current Principal Place of Business:**

14660 S.W. 93RD LANE  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

14660 S.W. 93RD LANE  
MIAMI, FL 33186

**New Mailing Address:**

FEI Number: 65-0942602      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MCLEOD, NEIL  
14660 S.W. 93RD LANE  
MIAMI, FL 33186 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DT ( ) Delete  
Name: MCLEOD, TARA-SIMONE  
Address: 536 14TH STREET #205  
City-St-Zip: MIAMI BEACH, FL 33139

Title: DPC ( ) Delete  
Name: MCLEOD, NEIL  
Address: 14660 SW 93RD LANE  
City-St-Zip: MIAMI, FL 33186

Title: DS ( ) Delete  
Name: MCLEOD, TAMARA  
Address: 6691 SOUTHWELL DRIVE  
City-St-Zip: FORT MYERS, FL 33966

Title: DV ( ) Delete  
Name: MCLEOD, GLORIA  
Address: 19641 STERLING DRIVE  
City-St-Zip: MIAMI, FL 33157

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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: NEIL MCLEOD

DPC

04/29/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date