


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 08:00 AM
Secretary of State


DOCUMENT # S61328
 1. Entity Name
NEIDA, INC.



Principal Place of Business
**18404 TREEHAVEN DRIVE
 HUDSON, FL 34667**

Mailing Address
**18404 TREEHAVEN DRIVE
 HUDSON, FL 34667**

6. Name and Address of Current Registered Agent
**PILIOURAS, ATHANASIOS
 18404 TREEHAVEN DR.
 HUDSON, FL 32301**



01122008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3079418	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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: *Athanasios Piliouras* DATE: 1-11-08

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PILIOURAS, ATHANASIOS 18404 TREEHAVEN DR. HUDSON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PILIOURAS, SAMUEL 18404 TREEHAVEN DR. HUDSON, FL
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05/13/08-80009-004 150.00

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: *Athanasios Piliouras* DATE: 1-11-08 DAYTIME PHONE #: 352-628-1336

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR