

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23000014638

**Entity Name:** ANIMAO INC.

**Current Principal Place of Business:**

1190 EGRETS WALK CIR  
UNIT 103  
NAPLES, FL 34108

**Current Mailing Address:**

1190 EGRETS WALK CIR  
UNIT 103  
NAPLES, FL 34108 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BONIGALA, ANIL  
1190 EGRETS WALK CIR  
UNIT 103  
NAPLES, FL 34108 US

*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

**Officer/Director Detail :**

Title D  
Name BOUCETTA, ISRA  
Address 1190 EGRETS WALK CIR UNIT 103  
City-State-Zip: NAPLES FL 34108

Title D  
Name BONIGALA, ARNAV  
Address 1190 EGRETS WALK CIR UNIT 103  
City-State-Zip: NAPLES FL 34108

Title D  
Name TITTIRANONDA, JOSH  
Address 1190 EGRETS WALK CIR UNIT 103  
City-State-Zip: NAPLES FL 34108

Title D  
Name LEI, KAILEY  
Address 1190 EGRETS WALK CIR UNIT 103  
City-State-Zip: NAPLES FL 34108

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ARNAV BONIGALA

D

05/01/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date