

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000021521

**Entity Name:** OFF THE DIME, INC.

**Current Principal Place of Business:**

4 ST. GEORGE STREET  
# 101  
ST. AUGUSTINE, FL 32084

**Current Mailing Address:**

4 ST. GEORGE STREET  
# 101  
ST. AUGUSTINE, FL 32084

**FEI Number:** 86-1095180

**Certificate of Status Desired:** No

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

KASS, IRVING J  
4 ST. GEORGE STREET  
# 101  
ST. AUGUSTINE, FL 32084 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            PRES  
Name            KASS, IRVING J  
Address        887 GARRISON DRIVE  
City-State-Zip: ST. AUGUSTINE FL 32092

Title            VP  
Name            KASS, SUSAN A  
Address        887 GARRISON DRIVE  
City-State-Zip: ST. AUGUSTINE FL 32092

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

**SIGNATURE:** IRVING KASS

**PRESIDENT**

**03/31/2015**

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

\_\_\_\_\_  
Date