## 2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000080050

Entity Name: HOLODEK INC.

**Current Principal Place of Business:** 

203 S. ORCHARD STREET ORMOND BEACH. FL 32174

**Current Mailing Address:** 

203 S. ORCHARD STREET ORMOND BEACH. FL 32174 US

FEI Number: 47-5197862 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

**BUSINESS FILINGS INCORPORATED** 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: MARK WILLIAMS 04/23/2016

Electronic Signature of Registered Agent

Date

Date

**FILED** Apr 23, 2016

**Secretary of State** 

CC6800471709

Officer/Director Detail:

UNIT D

Title DIRECTOR Title **PRESIDENT** GLOVER, BEAU GLOVER, BEAU Name Name

Address 203 S. ORCHARD STREET BLDG. 11 Address 203 S. ORCHARD STREET BLDG. 11 UNIT D

UNIT D

City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip: ORMOND BEACH FL 32174

Title **SECRETARY** Title **TREASURER** Name GLOVER, BEAU Name GLOVER, BEAU

203 S. ORCHARD STREET BLDG. 11 203 S. ORCHARD STREET BLDG. 11 Address Address

UNIT D

ORMOND BEACH FL 32174 City-State-Zip: ORMOND BEACH FL 32174 City-State-Zip:

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.

04/23/2016 SIGNATURE: BEAU GLOVER **PRESIDENT**