

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000314

**FILED**  
**Apr 30, 2018**  
**Secretary of State**  
**CC4745883027**

**Entity Name:** FARID CAPITAL CORPORATION

**Current Principal Place of Business:**

95 BARNES ROAD  
WALLINGFORD, CT 06492

**Current Mailing Address:**

95 BARNES ROAD  
WALLINGFORD, CT 06492 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           DIRECTOR  
Name           FARID, KAMRAN  
Address        95 BARNES ROAD  
City-State-Zip: WALLINGFORD CT 06492

Title           DIRECTOR  
Name           FARID, TARIQ  
Address        95 BARNES ROAD  
City-State-Zip: WALLINGFORD CT 06492

Title           TREASURER  
Name           FARID, TARIQ  
Address        95 BARNES ROAD  
City-State-Zip: WALLINGFORD CT 06492

Title           SECRETARY  
Name           FARID, KAMRAN  
Address        95 BARNES ROAD  
City-State-Zip: WALLINGFORD CT 06492

Title           PRESIDENT  
Name           FARID, TARIQ  
Address        95 BARNES ROAD  
City-State-Zip: WALLINGFORD CT 06492

*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:** TARIQ FARID

**PRESIDENT**

**04/30/2018**

Electronic Signature of Signing Officer/Director Detail

Date