

**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED  
May 21, 2008  
Secretary of State**

DOCUMENT# P02000076333

Entity Name: ODM PERFORMANCE SOLUTIONS INC.

**Current Principal Place of Business:**

1851 NW 125TH AVE.  
SUITE 300  
PEMBROKE PINES, FL 33028

**New Principal Place of Business:**

1806 NORTH FLAMINGO ROAD  
SUITE 300  
PEMBROKE PINES, FL 33028

**Current Mailing Address:**

4882 SUNKIST WAY  
COOPER CITY, FL 33330

**New Mailing Address:**

FEI Number: 45-0482177      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LEARY, MULLINGS  
9000 SHERIDAN STREET  
SUITE 125  
PEMBROKE PINES, FL 33027 US

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

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JORGE, GARCIA L  
Address: 4882 SUNKIST WAY  
City-St-Zip: COOPER CITY, FL 33330

Title: T/S ( ) Delete  
Name: KIM, GARCIA  
Address: 4882 SUNKIST WAY  
City-St-Zip: COOPER CITY, FL 33330

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: JORGE L. GARCIA

PRES

05/21/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date