2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2010
Secretary of State

DOCUMENT# P04000007780

Entity Name: WAVE DIRECT, INC.

Current Principal Place of Business:

9 DEL PRADO BLVD. N
SUITE B
CAPE CORAL, FL 33909

New Principal Place of Business:

2503 DEL PRADO BLVD. S.
SUITE 510
CAPE CORAL, FL 33904

Current Mailing Address:

1616-102 W. CAPE CORAL PKWY.
PMB#243
CAPE CORAL, FL 33914

New Mailing Address:

FEI Number: 20-0577528 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CHEYNE, ROB
1616-102 W. CAPE CORAL PKWY.
PMB#243
CAPE CORAL, FL 33914 US

Name and Address of New Registered Agent:

CHEYNE, ROB D
1616-102 W. CAPE CORAL PKWY.
PMB#243
CAPE CORAL, FL 33914 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: ROB D. CHEYNE 01/13/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD
Name: CHEYNE, ROB D
Address: 1616-102 W. CAPE CORAL PKWY , PMB#243
City-St-Zip: CAPE CORAL, FL 33914

Title: CEOD
Name: CHEYNE, ROB D
Address: 1616-102 W. CAPE CORAL PKWY , PMB#243
City-St-Zip: CAPE CORAL, FL 33914

Title: VP
Name: KNOX, MARY LOU
Address: 1616-102 W. CAPE CORAL PKWY , PMB#243
City-St-Zip: CAPE CORAL, FL 33914

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: MARY LOU KNOX VP 01/13/2010
Electronic Signature of Signing Officer or Director Date