

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002615

Entity Name: IDEA ONE INTERNATIONAL, INC.

FILED  
Apr 27, 2008  
Secretary of State

## Current Principal Place of Business:

2110 DREW STREET, STE. 200  
CLEARWATER, FL 33765

## New Principal Place of Business:

## Current Mailing Address:

2110 DREW STREET, STE. 200  
CLEARWATER, FL 33765

## New Mailing Address:

FEI Number: 52-2275336

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KAPLAN, KAREN  
2110 DREW STREET, STE. 200  
CLEARWATER, FL 33765 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: EZRA, MEIR  
Address: 2110 DREW STREET, STE. 200  
City-St-Zip: CLEARWATER, FL 33765

Title: D (X) Delete  
Name: CARDONE, GARY  
Address: 701 BAYVIEW DR  
City-St-Zip: BELLAIR, FL 33756

Title: D ( ) Delete  
Name: GERSHMAN, LARRY  
Address: 192 WEST LANE  
City-St-Zip: RIDGEFIELD, CT 06877

Title: S ( ) Delete  
Name: KAPLAN, KAREN  
Address: 2110 DREW STREET, STE. 200  
City-St-Zip: CLEARWATER, FL 33765

Title: D ( ) Delete  
Name: SUITER, RON  
Address: 26527 BASSWOOD AVE  
City-St-Zip: RANCHO PALOS VERDES, CA 90275

Title: T ( ) Delete  
Name: BARROS, JOSEFA  
Address: 2110 DREW ST SUITE 200  
City-St-Zip: CLEARWATER, FL 33765

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: KAREN KAPLAN

SEC

04/27/2008

Electronic Signature of Signing Officer or Director

Date