

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000103544

**Entity Name:** COMPETITIVE EDGE PERFORMANCE, INC.

**Current Principal Place of Business:**

640 BROOKER CREEK BLVD.  
STE. 425  
OLDSMAR, FL 34677

**Current Mailing Address:**

640 BROOKER CREEK BLVD.  
STE. 425  
OLDSMAR, FL 34677

**FEI Number:** 26-1106137

**Certificate of Status Desired:** No

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

WAZ, JASON D.  
640 BROOKER CREEK BLVD.  
STE. 425  
OLDSMAR, FL 34677 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 PD  
Name WAZ, JASON D  
Address 640 BROOKER CREEK BLVD., STE.  
425  
City-State-Zip: OLDSMAR FL 34677

*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:** JASON D. WAZ

**PRESIDENT**

**03/18/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date