2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: _

Secretary of State DOCUMENT #601195 1. Entity Name 01-25-2007 90033 031 ***158.75 EDSA, INC. Principal Place of Business Mailing Address % JOSEPH J. LALLI, PRESIDENT 1512 EAST BROWARD BLVD., SUITE 110 % JOSEPH J. LALLI, PRESIDENT 1512 EAST BROWARD BLVD., SUITE 110 FORT LAUDERDALE, FL 33301 FORT LAUDERDALE, FL 33301 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt. #. etc. Suite, Apt. #, etc. 01152007 Chg-P CR2E034 (12/06) 4. FEI Number Applied For City & State City & State 59-1265229 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LALLI, JOSEPH J Street Address (P.O. Box Number is Not Acceptable) 1512 EAST BROWARD SUITE 110 FORT LAUDERDALE, FL 33301 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature: typed or printed name of registered apoint and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. ☐ Change ☐ Addition TITLE vn Delete TITLE GREGG R. SUTTON 925 S.W. 215T. STREET RENNER, WILLIAM B NAME NAME STREET ADORESS 2631 MARION DR STREET ADDRESS FOLT LAUDERDACE, FL 18515 CITY-ST-ZIP FORT LAUDERDALE, FL 33316 CITY-ST-ZIP ☐ Change Addition ☐ Defete TITLE BEHLING, J. ROBERT NAME 821 SE 19TH STREET STREET ADDRESS STREET ADDRESS. FORT LAUDERDALE, FL 33315 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE LALLI, JOSEPH J. NAME NAME STREET ADDRESS STREET ADDRESS 601 N. VICTORIA PARK ROAD CITY-ST-ZIP FT. LAUDERDALE, FL CITY-ST-ZIP coo ☐ Delete ☐ Change ■ Addition SMITH, DOUGLAS C NAME NAME 1701 NE 19TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-ZIP FORT LAUDERDALE, FL 33305 ☐ Delete TITLE ☐ Change Addition TITLE VD MILLER, JOHN W NAME NAME STREET ADDRESS. 4363 BENEDICTINE CIRCLE STREET ADDRESS CITY-ST-ZIP ORLANDO, FL CITY-ST-ZIP TITLE CEOT ☐ Delete TITLE ☐ Change ■ Addition VENDRELL, JOAQUIN R NAME STREET ADORESS STREET ADORESS 1000 N.W. 161ST AVENUE CATY-ST-ZIP PEMBROKE PINES, FL CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

OFFICER OR DIRECTOR

15 -Tan 2007

FILED

Jan 25, 2007 8:00 am