


FILED
Jul 18, 2008 8:00 am
Secretary of State

07-18-2008 90013 040 ***158.75

**2008 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # 611549 1. Entity Name ODABASHIAN INTERNATIONAL CORPORATION	
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Principal Place of Business
 230 S FEDERAL HWY
 DANIA BEACH, FL 33004

Mailing Address
 230 S FEDERAL HWY
 DANIA BEACH, FL 33004

60045011



07102008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1913280	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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8. Name and Address of Current Registered Agent

ODABASHIAN, EDWARD
 230 S FEDERAL HWY
 DANIA BEACH, FL 33004

DO NOT WRITE
IN THIS SPACE

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 agent and title if applicable.

(NOTE: Registered Agent Signature required when resigning)

DATE _____

FILE NOW!! FEE IS \$550.00
Due by September 12, 2008

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ODABACHIAN, EDUARDO 230 S FED HWY DANIA, FL 33004
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST ODABACHIAN, JAMES 8201 N. FEDERAL HWY. BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE
IN THIS SPACE

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 submit 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.

SIGNATURE: _____

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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July 14, 2008 9549222876