

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001629

FILED
Feb 15, 2011
Secretary of State

Entity Name: EDM PERFORMANCE ACCESSORIES INC

Current Principal Place of Business:

1400 PIONEER STREET
BREA, CA 92821

New Principal Place of Business:

1400 PIONEER STREET
BREA
BREA, CA 92821

Current Mailing Address:

1400 PIONEER STREET
BREA, CA 92821

New Mailing Address:

1400 PIONEER STREET
BREA
BREA, CA 92821

FEI Number: 95-4216462

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIUKKONEN, DAVID
1550 GROVE COURT
TAVARES, FL 32778 US

Name and Address of New Registered Agent:

LIUKKONEN, DAVID
1550 GROVE COURT
BREA
TAVARES, FL 32778 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: DAVID LIUKKONEN

02/15/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: SWARTZBAUGH, JIM E
Address: 517 DOROTHEA RD
City-St-Zip: LA HABRA, CA 90631

Title: S
Name: SWARTZBAUGH, MADONNA
Address: 517 DOROTHEA RD
City-St-Zip: LA HABRA, CA 90631

Title: CFO
Name: HENDERSON, WAYNE L
Address: 1400 PIONEER ST
City-St-Zip: BREA, CA 92821

Title: CFO
Name: HENDERSON, WAYNE L
Address: 1400 PIONEER ST
City-St-Zip: BREA, CA 92821

Title: CFO
Name: HENDERSON, WAYNE
Address: 1400 PIONEER ST
City-St-Zip: BREA, CA 92821

Title: CFO
Name: HENDERSON, WAYNE L
Address: 1400 PIONEER ST
City-St-Zip: BREA, CA 92821

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: WAYNE HENDERSON

CFO

02/15/2011

Electronic Signature of Signing Officer or Director

Date