2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Aug 18, 2008
Secretary of State

DOCUMENT# F06000007448

Entity Name: PERIHELION GLOBAL, INC.

Current Principal Place of Business:

32 EAST COUNTY HWY 30-A
SUITE 201
SANTA ROSA BEACH, FL 32459

New Principal Place of Business:

2166 W CO HWY 30-A
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

PO BOX 488
MARY ESTHER, FL 32569

New Mailing Address:

FEI Number: 68-0637279 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEEBE, JOHN H
165 N MAPLE ST
SANTA ROSA BEACH, FL 32459 US

Name and Address of New Registered Agent:

CLAYCOMB, FRANK R CPA
471 SANDMORE SHORES DR
MARY ESTHER, FL 32569 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: FRANK CLAYCOMB, CPA 08/18/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PDS ( ) Delete
Name: BEEBE, JOHN H
Address: PO BOX 488
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete
Name: VARLEY, MICHAEL R
Address: PO BOX 488
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete
Name: CLAYCOMB, FRANK R CPA
Address: PO BOX 488
City-St-Zip: MARY ESTHER, FL 32569

Title: D ( ) Delete
Name: TAYLOR, CECIL DR.
Address: PO BOX 488
City-St-Zip: MARY ESTHER, FL 32569

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:

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: JOHN H. BEEBE PDS 08/18/2008
Electronic Signature of Signing Officer or Director Date