

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000025543

FILED
Apr 04, 2007
Secretary of State

Entity Name: EDA ACQUISITIONS LLC

Current Principal Place of Business:

1890 S. OCEAN DRIVE # 708
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

1890 S. OCEAN DRIVE # 708
HALLANDALE, FL 33009 US

New Mailing Address:

FEI Number: 20-0975347 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIDELMAN, ALEX
1890 S. OCEAN DRIVE # 708
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: FIDELMAN, ALEX
Address: 1890 S. OCEAN DRIVE # 708
City-St-Zip: HALLANDALE, FL 33009 US

Title: MGRM () Delete
Name: PONOMARENKO, DENIS
Address: 1890 S. OCEAN DRIVE # 708
City-St-Zip: HALLANDALE, FL 33009 US

Title: MGRM () Delete
Name: POPOV, EVGENIY
Address: 1890 S. OCEAN DRIVE # 708
City-St-Zip: HALLANDALE, FL 33009 US

ADDITIONS/CHANGES:

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 for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALEX FIDELMAN

MR

04/04/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date