

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L43034

Entity Name: LEDGEHILL INTERNATIONAL, INC.

FILED  
Apr 24, 2009  
Secretary of State

## Current Principal Place of Business:

C/O STANTON G. LEVIN  
1570 MADRUGA AVENUE SUITE 311  
CORAL GABLES, FL 33146 US

## New Principal Place of Business:

C/O THOREN AND CRUCET, P.A.  
8600 NW S RIVER DRIVE STE 101  
MIAMI, FL 33166 US

## Current Mailing Address:

6928 CAMARIN STREET  
CORAL GABLES, FL 33146 US

## New Mailing Address:

FEI Number: 65-0199095

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEVIN, STANTON G  
C/O STANTON G. LEVIN  
1570 MADRUGA AVENUE SUITE 311  
CORAL GABLES, FL 33146 US

## Name and Address of New Registered Agent:

LEVIN, STANTON G  
C/O STANTON G. LEVIN  
9485 SW 72 STREET, SUITE #A-258  
MIAMI, FL 33173 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:

04/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: DUNCAN, L. FULLER  
Address: 31 MOLYNES RD  
City-St-Zip: KINGSTON 10 JAMAICA,

Title: D ( ) Delete  
Name: BARROW, KENDIS W.  
Address: 31 MOLYNES RD  
City-St-Zip: KINGSTON 10 JAMAICA,

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: L FULLER DUNCAN

D

04/24/2009

Electronic Signature of Signing Officer or Director

Date