

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007085

FILED
May 01, 2008
Secretary of State

Entity Name: EDGE ZONES, INC.

Current Principal Place of Business:

2214 N. MIAMI AVE.
MIAMI, FL 33127

New Principal Place of Business:

609 LENOX AVE.
4
MIAMI BEACH, FL 33139

Current Mailing Address:

2214 N. MIAMI AVE.
MIAMI, FL 33127

New Mailing Address:

P.O. BOX 398356
MIAMI BEACH, FL 33239

FEI Number: 20-2670180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

OQUET, SAGRARIO
609 LENOX AVE. #4
MIAMI BEACH, FL 33139 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: OQUET, SAGRARIO
Address: 609 LENOX AVE. #4
City-St-Zip: MIAMI BEACH, FL 33139

Title: D () Delete
Name: VARDI, DAVID
Address: P.O. BOX 370463
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: KEDDELL, GABRIELA
Address: 2214 N. MIAMI AVE.
City-St-Zip: MIAMI, FL 33127

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: MS. (X) Change () Addition
Name: OQUET, SAGRARIO
Address: 609 LENOX AVE. #4
City-St-Zip: MIAMI BEACH, FL 33139

Title: MR. (X) Change () Addition
Name: VARDI, DAVID
Address: P.O. BOX 370463
City-St-Zip: MIAMI, FL 33137

Title: MS. (X) Change () Addition
Name: KEDDELL, GABRIELA
Address: P.O. BOX 398356
City-St-Zip: MIAMI BEACH, FL 33239

Title: MR. () Change (X) Addition
Name: MCCRAW, DOUGH
Address: 508 NW 1ST. AVE.
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: MR. () Change (X) Addition
Name: MORETA, RICHARD MARC
Address: 1229 EUCLID AVE. UNIT 11
City-St-Zip: MIAMI BEACH, FL 33129

Title: MS. () Change (X) Addition
Name: HUERTAS, JOSEFINA
Address: 10 NW 87 AVE. #B102
City-St-Zip: MIAMI, FL 33172

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAGRARIO OQUET

MS.

05/01/2008

Electronic Signature of Signing Officer or Director

Date