

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006216

FILED  
Jun 13, 2011  
Secretary of State

**Entity Name:** THE MOTIVATIONAL EDGE, INC.

**Current Principal Place of Business:**

555 N.E. 15TH ST  
STE 213  
MIAMI, FL 33132

**New Principal Place of Business:**

**Current Mailing Address:**

555 N.E. 15TH ST  
STE 213  
MIAMI, FL 33132

**New Mailing Address:**

**FEI Number:** 26-2916391

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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: CEO  
Name: WELSCH, IAN  
Address: 555 NE 15TH ST #213  
City-St-Zip: MIAMI, FL 33132

Title: D  
Name: SERON, MERCEDES  
Address: 1990 BAY DR APT 1  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D  
Name: GAZZARA, SHAUN  
Address: 555 NE 15TH ST #213  
City-St-Zip: MIAMI, FL 33132

Title: D  
Name: ORTIZ, MICHAEL  
Address: 444 ALTON RD  
City-St-Zip: MIAMI BEACH, FL 33139

Title: D  
Name: PAUL, RICHARD  
Address: 555 NE 15TH ST  
City-St-Zip: MIAMI, FL 33132 US

Title: D  
Name: SPRINGSTEAD, TIMOTHY  
Address: 555 NE 15TH ST 213  
City-St-Zip: MIAMI, FL 33132 US

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

SIGNATURE: IAN WELSCH

CEO

06/13/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date