

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000003105

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** KALOS INTERNATIONAL, INC

**Current Principal Place of Business:**

5450 BRUCE B. DOWNS BLVD.  
#381  
WESLEY CHAPEL, FL 33544

**New Principal Place of Business:**

**Current Mailing Address:**

5450 BRUCE B. DOWNS BLVD.  
#381  
WESLEY CHAPEL, FL 33544

**New Mailing Address:**

**FEI Number:** 26-4568566

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOSAPHAT, AILEEN  
31619 SPOONFLOWER CIRCLE  
WESLEY CHAPEL, FL 33545 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:** DIR  
**Name:** JOSAPHAT, AILEEN  
**Address:** 31619 SPOONFLOWER CIRCLE  
**City-St-Zip:** WESLEY CHAPEL, FL 33545

**Title:** DIR  
**Name:** DESAUTELS, VERONIQUE  
**Address:** 4235 MANXCAT LN  
**City-St-Zip:** NEW PORT RICHEY, FL 34653

**Title:** DIR  
**Name:** WARD, JOHNNY D  
**Address:** 10822 CELTIC WOODS AVE.  
**City-St-Zip:** TAMPA, FL 33647

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:** AILEEN JOSAPHAT

DIR

03/04/2010

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

\_\_\_\_\_  
Date