

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P00000117260

1. Entity Name
EDDEN CLOTHING COMPANY, INC.



Principal Place of Business
**1120 NEW PARKVIEW PL
WEST PALM BEACH, FL 33417**

Mailing Address
**PO BOX 807
LAKE WORTH, FL 33417**



04292008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. Fil Number 65-1077410	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**RICHARDS, WAYNE
2001 BROADWAY, SUITE 101
RIVERIA BEACH, FL 33904**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature of the registered agent of the corporation. (NONE Required) Agent signature required should not be left blank.

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	U00000939791 05/28/08-80041-016 150.00
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10. OFFICERS AND DIRECTORS

101 NAME STREET ADDRESS CITY-STATE-ZIP	P EDDEN, H. CHRISTOPHER 1120 NEW PARKVIEW PLACE WEST PALM BEACH, FL 33417
102 NAME STREET ADDRESS CITY-STATE-ZIP	
103 NAME STREET ADDRESS CITY-STATE-ZIP	
104 NAME STREET ADDRESS CITY-STATE-ZIP	
105 NAME STREET ADDRESS CITY-STATE-ZIP	
106 NAME STREET ADDRESS CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exceptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental reports is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Lauren Usma* **LAUREN USMA** **04/28/08** **(561) 712-4171**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR