

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000049845

Entity Name: UPPER LIMIT CORP.

FILED  
Apr 25, 2007  
Secretary of State

## Current Principal Place of Business:

15510 FURLONG CIRCLE  
ODESSA, FL 33556

## New Principal Place of Business:

## Current Mailing Address:

15510 FURLONG CIRCLE  
ODESSA, FL 33556

## New Mailing Address:

FEI Number: 13-4277934

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERTS & ROBERTS, P.A.  
6570 30TH AVE N  
ST PETERSBURG, FL 33710 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: EDELMANN, GARY  
Address: 15510 FURLONG CIRCLE  
City-St-Zip: ODESSA, FL 33556

Title: VD (X) Delete  
Name: EDELMANN, DEBORAH  
Address: 15510 FURLONG CIRCLE  
City-St-Zip: ODESSA, FL 33556

Title: DST ( ) Delete  
Name: EDELMANN, ERIC  
Address: 4515 WHITTON WAY #119  
City-St-Zip: NEW PORT RICHEY, FL 34653

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VD (X) Change ( ) Addition  
Name: EDELMANN, ERIC  
Address: 4515 WHITTON WAY #119  
City-St-Zip: NEW PORT RICHEY, FL 34653

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: GARY EDELMANN

DP

04/25/2007

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

\_\_\_\_\_  
Date