2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000124337

City-St-Zip:

Entity Name: GODSONS IMPORT/EXPORT INC

FILED Jul 15, 2008 Secretary of State

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Current P	rincipal Place of Business:	New Principal Place of Business:
8142 TESSA TERR E JACKSONVILLE, FL 32244		7664 VANDALAY DRIVE JACKSONVILLE, FL 32244
Current M	lailing Address:	New Mailing Address:
	SA TERR E IVILLE, FL 32244	PO BOX 442384 JACKSONVILLE, FL 32222
FEI Number	: 59-3830451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
Name and	l Address of Current Registered Agen	t: Name and Address of New Registered Agent:
8142 TES	, OBIAGWU SA TERRACE EAST IVILLE, FL 32244 US	GODSON, OBIAGWU 7664 VANDALAY DRIVE JACKSONVILLE, FL 32244 US
The above in the State	e named entity submits this statement for e of Florida.	the purpose of changing its registered office or registered agent, or both,
SIGNATUI	RE:	07/15/2008
	Electronic Signature of Registered	d Agent Date
	ice with s. 607.193(2)(b), F.S., the corporation of mpaign Financing Trust Fund Contribution().	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	PD () Delete OBIAGWU, GODSON C 8142 TESSA TERR E JACKSONVILLE, FL 32244	Title: PD (X) Change () Addition Name: OBIAGWU, GODSON C Address: 7664 VANDALAY DRIVE City-St-Zip: JACKSONVILLE, FL 32244
Title: Name: Address: City-St-Zip:	V () Delete OBIAGWU, JOSEPH T 8142 TESSA TERR E JACKSONVILLE, FL 32244	Title: V (X) Change () Addition Name: OBIAGWU, JOSEPH T Address: 7664 VANDALAY DRIVE City-St-Zip: JACKSONVILLE, FL 32244
Title: Name: Address: City-St-Zip:	() Delete	Title: S () Change (X) Addition Name: OBIAGWU, GODSLOVE I Address: 7664 VANDALAY DRIVE City-St-Zip: JACKSONVILLE, FL 32244
Title: Name: Address:	() Delete	Title: T () Change (X) Addition Name: OBIAGWU, PRECIOUS J Address: 7664 VANDALAY DRIVE

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.

City-St-Zip:

SIGNATURE: GODSON C. OBIAGWU PD 07/15/2008

JACKSONVILLE, FL 32244