

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 09, 2008 8:00 am**  
**Secretary of State**

06-09-2008 90004 001 \*\*\*550.00  
06-09-2008 90004 002 \*\*\*\*\*8.75

<b>DOCUMENT # P05000129060</b> 1. Entity Name <b>EXPRESS ONE INTERNATIONAL HOLDING, INC.</b>					
Principal Place of Business <b>1890 STATE RD 436 CASCADE EXECU. SUITE 372 WINTER PARK, FL 32792</b>			Mailing Address <b>1890 STATE RD 436 CASCADE EXECU. SUITE 372 WINTER PARK, FL 32792</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FEI Number <b>42-1679787</b>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			<b>\$8.75</b> Additional Fee Required		
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
<b>KUCHTA, JOE D 1890 STATE RD 436 CASCADE EXEC. CENTER SUITE 373 WINTER PARK, FL 32792</b>			Name <b>RONALD W. GRAY</b> Street Address (P.O. Box Number is Not Acceptable) <b>1890 STATE ROAD 436</b> <b>CASCADE EXEC. CENTER SUITE 373</b> City <b>WINTER PARK</b> FL <b>32792</b>		
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 <b>6-3-2008</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$550.00</b> <b>Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P KUCHTA, JOE D 1890 STATE ROAD 436 CASCADE SUITE 373 WINTER PARK, FL 32792</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRESIDENT RONALD W. GRAY 1890 STATE ROAD 436, SUITE 373 WINTER PARK, FLORIDA 32792</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEC PLACER, MERCEDES 1890 S.ROAD 436 CASCADE EXEC.SUITE 373 WINTER PARK, FL 32792</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEC RONALD W. GRAY 1890 STATE ROAD 436, SUITE 373 WINTER PARK, FLORIDA 32792</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>STANLEY HELTON V. P STANLEY HELTON 1890 STATE ROAD 436 SUITE 373 WINTER PARK, FL. 32792</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <b>RONALD W. GRAY</b> <b>6-3-2008</b> <b>407-657-7511</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					