

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 22, 2008 8:00 am**  
**Secretary of State**

01-22-2008 90078 011 \*\*\*150.00

**DOCUMENT # P06000065784**

1. Entity Name  
**STOUGH INTERNATIONAL, INC.**



Principal Place of Business Mailing Address  
**1314 EAST LAS OLAS BLVD STE 136** **1314 EAST LAS OLAS BLVD STE 136**  
**FORT LAUDERDALE, FL 33301 US** **FORT LAUDERDALE, FL 33301 US**

400000-



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

01142008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For  
**20-4970319** Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

## 6. Name and Address of Current Registered Agent

**EVANS, GEORGE M**  
**801 DOUGLAS ROAD**  
**CATHEDRAL ROOM - SUITE 101**  
**CORAL GABLES, FL 33134**

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**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**

## 10. OFFICERS AND DIRECTORS

TITLE **P** ☒ Delete  
NAME **STOUGH, STEPHEN**  
STREET ADDRESS **701 SW 8 WAY**  
CITY - ST - ZIP **FORT LAUDERDALE, FL 33315**

TITLE **VP** ☒ Delete  
NAME **MOYLE, MEGHAN**  
STREET ADDRESS **701 SW 8 WAY**  
CITY - ST - ZIP **FORT LAUDERDALE, FL 33315**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition  
NAME **Stephen Stough**  
STREET ADDRESS **1314 E. Las Olas Blvd. Ste 136**  
CITY - ST - ZIP **Ft. Lauderdale FL 33301**

TITLE **VP** ☒ Change ☐ Addition  
NAME **Meghan Moyle**  
STREET ADDRESS **1314 E. Las Olas Blvd. Ste 136**  
CITY - ST - ZIP **Ft. Lauderdale FL 33301**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition  
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NAME  
STREET ADDRESS  
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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: Meghan Moyle **Meghan Moyle** **1-14-08** **954.980.8444**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #