

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000073238

FILED  
Apr 30, 2010  
Secretary of State

Entity Name: EDUPULSE UNLIMITED, INC.

**Current Principal Place of Business:**

6760 NW 30TH STREET  
SUNRISE, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

6760 NW 30TH STREET  
SUNRISE, FL 33313

**New Mailing Address:**

FEI Number: 51-0582846

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POWELL, SHARON L  
6760 NW 30TH STREET  
SUNRISE, FL 33313 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: PRES  
Name: POWELL, SHARON L  
Address: 6760 NW 30TH STREET  
City-St-Zip: SUNRISE, FL 33313

Title: VP  
Name: BONNER, DAVID A  
Address: 5443 NW 110TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: A.VP  
Name: BONNER, AUDREY  
Address: 5443 NW 110TH AVENUE  
City-St-Zip: CORAL SPRINGS, FL 33076

I hereby 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 all other like empowered.

SIGNATURE: SHARON POWELL

PRES

04/30/2010

Electronic Signature of Signing Officer or Director

Date