2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000102080

Entity Name: PROJECT 18, INC.

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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20432 NE 16TH PLACE N. MIAMI BEACH, FL 33179 US

Current Mailing Address: New Mailing Address:

20432 NE 16TH PLACE N. MIAMI BEACH, FL 33179 US

FEI Number: 20-5329642 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHAI, EYAL

20432 N.E. 16TH PLACE

NORTH MIAMI BEACH, FL 33179 US

TORCHIN, DAVID CPA

5531 NORTH UNIVERSITY DR.

CORAL SPRINGS, FL 33067 US

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: DAVID TOURCHIN 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O () Delete Title: O (X) Change () Addition

 Name:
 CHAI, EYAL
 Name:
 CHAI, EYAL OFF

 Address:
 1034 EAST LAS OLAS
 Address:
 20432 NE 16TH PL

City-St-Zip: FORT LAUDERDALE, FL 33301 US City-St-Zip: NORTH MIAMI, FL 33179 US

Title: O (X) Delete Title: () Change () Addition

 Name:
 AMSELLEM, ISSAC
 Name:

 Address:
 1034 EAST LAS OLAS
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33301 US
 City-St-Zip:

Title: S (X) Delete Title: () Change () Addition

 Name:
 SARILAN, EMOR
 Name:

 Address:
 20432 NE 16TH PLACE
 Address:

 City-St-Zip:
 N. MIAMI BEACH, FL 33179 US
 City-St-Zip:

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: EYAL CHAI O 04/29/2009