2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000006954

City-St-Zip:

LAKE WORTH, FL 33463 US

FILED May 01, 2009 Secretary of State

Entity Nam	1e: PRIMAL AU	JDIO, INC.					
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
BLDG E8	TUNE CIRCLE						
	ON, FL 33414	US					
Current IVI	ailing Address	:	New Maili	New Mailing Address:			
BLDG E8	TUNE CIRCLE						
WELLING	ON, FL 33414	US					
FEI Number:	20-8253657	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
11360 FOR BLDG E8	CHRISTOPHE TUNE CIRCLE ON, FL 33414		4301 NW 9	WEISS, STEVE PRES 4301 NW 93RD WAY SUNRISE, FL 33351 US			
The above in the State		ubmits this statement for the pu	rpose of changing i	ts registered	office or registered agent, or l	ooth,	
SIGNATUR	E: STEVE WE	EISS		05/01/2009			
	Electronic	Signature of Registered Ager	nt	Date			
	,	2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notic	e.			
OFFICERS	AND DIRECT	ORS:	ADDITION	IS/CHANGE	S TO OFFICERS AND DIREC	CTORS:	
Title: Name: Address: City-St-Zip:	PD () D WEISS, STEVE 4301 NW 93RD V SUNRISE, FL 33		Title: Name: Address: City-St-Zip:	(() Change () Addition		
Title: Name: Address: City-St-Zip:	RAPPOLT, CHRIS	CIRCLE BLDG E8	Title: Name: Address: City-St-Zip:	WINOKUR, B 6411 BARTO	(X) Change ()Addition RAD N CREEK CIRCLE H, FL 33463 US		
Title: Name: Address:	SD () D WINOKUR, BRAD 6411 BARTON CI		Title: Name: Address:	(() Change () Addition		

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: STEVE WEISS **PRES** 05/01/2009