2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000040848

Address:

City-St-Zip:

2255 FRIDAY CT #223

WEST MELBOURNE, FL 32904

Entity Name: PIMEDGE INCORPORATED

FILED Apr 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 6278 N FEDERAL HIGHWAY 295 FORT LAUDERDALE, FL 33308 **Current Mailing Address: New Mailing Address:** 6278 N FEDERAL HIGHWAY 295 FORT LAUDERDALE, FL 33308 FEI Number: 98-0579318 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: NRAI SERVICES INC TIMO, WIKSTEN CEO 2731 EXECUTIVE PARK DRIVE SUITE 4 6278 N FEDERAL HIGHWAY WESTON, FL 33331 FORT LAUDERDALE, FL 33308 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: TIMO WIKSTEN 04/24/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition WIKSTEN, TIMO Name: Name: TVASPANNSVAGEN 3, SE 177 58 Address: Address: City-St-Zip: JARFALLA SWEDEN, City-St-Zip: Title: Title: (X) Delete () Change () Addition Name: HAGGSTROM, MADELLELNE Name: **WASAVAGEN 14 SE 177 52** Address: Address: JARFALLA SWEDEN, City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition GUENTHER, ANNETTE G Name: Name: 200 E 5TH AVE SUITE 124 Address: Address: City-St-Zip: NAPERVILLE, IL 60563 City-St-Zip: Title: (X) Delete Title: () Change () Addition LATIMER, DANIEL Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: TIMO WIKSTEN CEO 04/24/2009