

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000048240

Entity Name: EDITORIAL CONNECTION, INC.

FILED  
Mar 03, 2009  
Secretary of State

## Current Principal Place of Business:

440 E. SAMPLE RD  
SUITE # 204-A  
POMPANO BEACH, FL 33064

## Current Mailing Address:

440 E. SAMPLE RD  
SUITE # 204-A  
POMPANO BEACH, FL 33064

## New Principal Place of Business:

440 E. SAMPLE RD  
SUITE # 104  
POMPANO BEACH, FL 33064

## New Mailing Address:

440 E. SAMPLE RD  
SUITE # 104  
POMPANO BEACH, FL 33064

FEI Number: 26-2602372

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LUCIA, EDSON S  
440 E. SAMPLE RD  
SUITE # 204-A  
POMPANO BEACH, FL 33064 US

## Name and Address of New Registered Agent:

SMART TAX  
513 E. SAMPLE RD  
POMPANO BEACH, FL 33064 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: FERNANDA LOLA

03/03/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LUCIA, EDSON S  
Address: 440 E SAMPLE RD SUITE 204-A  
City-St-Zip: POMPAN0 BEACH, FL 33064 US

Title: VP ( ) Delete  
Name: ROMAO, ALEXANDRE  
Address: RUA SERRA DE BRAGANCA, 60  
City-St-Zip: TATUAPÉ, SP 033 18 00 BR

Title: VP ( ) Delete  
Name: OLIVEIRA, WELLINGTON O  
Address: RUA SERRA DE BRAGANCA, 60  
City-St-Zip: TATUAPÉ, SP 033 18 00 BR

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: LUCIA, EDSON S  
Address: 440 E SAMPLE RD SUITE 104  
City-St-Zip: POMPAN0 BEACH, FL 33064 US

Title: VP (X) Change ( ) Addition  
Name: ROMAO, ALEXANDRE  
Address: RUA SERRA DE BRAGANCA, 58  
City-St-Zip: SAO PAULO, SP 03318-000 BR

Title: VP (X) Change ( ) Addition  
Name: OLIVEIRA, WELLINGTON O  
Address: RUA SERRA DE BRAGANCA, 58  
City-St-Zip: SAO PAULO, SP 03318-000 BR

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: EDSON S. LUCIA

P

03/03/2009

Electronic Signature of Signing Officer or Director

Date