

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000049927

FILED
Apr 26, 2010
Secretary of State

Entity Name: ONE STEP ABOVE THE REST, INC.

Current Principal Place of Business:

1418 NEW YORK AVENUE
SAINT CLOUD, FL 34769 US

New Principal Place of Business:

Current Mailing Address:

1418 NEW YORK AVENUE
SAINT CLOUD, FL 34769 US

New Mailing Address:

FEI Number: 26-2634644

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TROLINDER, MIKE R
1004 NEW YORK AVENUE
SUITE 124
SAINT CLOUD, FL 34769 US

Name and Address of New Registered Agent:

TROLINDER, MIKE R VP
1418 NEW YORK AVENUE
SAINT CLOUD, FL 34769 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: MIKE R. TROLINDER

04/26/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: TROLINDER, DEBRA S
Address: 1418 NEW YORK AVENUE
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: VP
Name: TROLINDER, MIKE R
Address: 1418 NEW YORK AVENUE,
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: S
Name: TROLINDER, DEBRA S
Address: 1418 NEW YORK AVENUE
City-St-Zip: SAINT CLOUD, FL 34769 US

Title: T
Name: TROLINDER, DEBRA S
Address: 1418 NEW YORK AVENUE
City-St-Zip: SAINT CLOUD, FL 34769 US

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: DEBRA S. TROLINDER

P

04/26/2010

Electronic Signature of Signing Officer or Director

Date