

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000001744

FILED  
May 04, 2009  
Secretary of State

Entity Name: EDWIN'S CORPORATION OF FLORIDA

**Current Principal Place of Business:**

2273 SW 182ND WAY  
MIRAMAR, FL 33029 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 820112  
SOUTH FLORIDA, FL 330820112

**New Mailing Address:**

FEI Number: 65-0630799      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MORALES, ALEXSANDRA  
2273 SW 182ND WAY  
MIRAMAR, FL 33029 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MORALES, EDWIN  
Address: 2273 SW 182ND WAY  
City-St-Zip: MIRAMAR, FL 33029

Title: VP ( ) Delete  
Name: MORALES, ALEXSANDRA  
Address: 2273 SW 182ND WAY  
City-St-Zip: MIRAMAR, FL 33029

Title: S (X) Delete  
Name: MORALES, GIOVANNA  
Address: 2273 SW 182ND WAY  
City-St-Zip: MIRAMAR, FL 33029

Title: S (X) Delete  
Name: MORALES, ANTONELLA  
Address: 2273 SW 182ND WAY  
City-St-Zip: MIRAMAR, FL 33029

Title: S (X) Delete  
Name: MORALES, MIRANDA  
Address: 2273 SW 182ND WAY  
City-St-Zip: MIRAMAR, FL 33029

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ALEXSANDRA MORALES

VP

05/04/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date