

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000077543

FILED  
Apr 29, 2008  
Secretary of State

Entity Name: MAISON INTERNATIONAL CORP.

**Current Principal Place of Business:**

1726 PAM CIRCLE  
ORLANDO, FL 32809 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 692664  
ORLANDO, FL 328692664 US

**New Mailing Address:**

FEI Number: 59-3401210      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KRONENBERG, MARIA L  
1726 PAM CIRCLE  
ORLANDO, FL 32809 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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PSD ( ) Delete  
Name: KRONENBERG, MARIA L  
Address: 1726 PAM CIRCLE  
City-St-Zip: ORLANDO, FL 32809 US

Title: VPD ( ) Delete  
Name: PODKANENI, NAUM  
Address: RUA 5 DE JULHO 38 AP 1001 COPACABANA  
City-St-Zip: RIO DE JANEIRO RJ BRAZIL, 22051030 OC

Title: TD ( ) Delete  
Name: PODKANENI, ANGELA B  
Address: RUA 5 DE JULHO 38 APT. 1001 COPACABANA  
City-St-Zip: RIO DE JANEIRO RJ BRAZIL, 22051030 OC

**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:

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: MARIA L. KRONENBERG

PRES

04/29/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date