

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 16, 2008 8:00 am
Secretary of State

04-16-2008 90015 005 ***150.00

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1. Entity Name
EDMUNDS INTERNATIONAL (U.S.A.), INC.



Principal Place of Business
1100
~~1012~~ TANGELO ISLE
FORT LAUDERDALE, FL 33315-1661

Mailing Address
1500 NE 51 STREET
FORT LAUDERDALE, FL 33334-5710

DO NOT WRITE IN THIS SPACE



03302008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0897067

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PERRY, JOHN
~~1012~~ TANGELO ISLE *1100 TANGELO ISLE*
FORT LAUDERDALE, FL 33315-1661

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be**
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME PERRY, JOHN
STREET ADDRESS ~~1012 TANGELO ISLE~~ *1100 TANGELO ISLE*
CITY-ST-ZIP FORT LAUDERDALE, FL 333151661

TITLE
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John Perry

Date

Daytime Phone #

4/3/08 954-478-4301