

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 11, 2007 8:00 am**  
**Secretary of State**

04-11-2007 90022 046 \*\*\*150.00

**DOCUMENT # P98000061086**

1. Entity Name  
**NORFOLK INTERNATIONAL, INC.**



Principal Place of Business  
**1585 LANDS END ROAD  
MANALAPAN, FL 33462**

Mailing Address  
**1585 LANDS END ROAD  
MANALAPAN, FL 33462**

40056305



2. Principal Place of Business - No P.O. Box #  
**201 S. NARCISSUS AV**  
Suite, Apt. #, etc.  
**804**

3. Mailing Address  
**201 S. NARCISSUS AV.**  
Suite, Apt. #, etc.  
**804**

03272007 Chg-P CR2E034 (12/06)

City & State  
**WEST PALM BEACH FL**  
Zip  
**33401** Country  
**USA**

City & State  
**WEST PALM BEACH FL**  
Zip  
**33401** Country  
**USA**

4. FEI Number  
**65-0857275** Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

**VIVIES, PATRICK  
700 E. DANIA BEACH BOULEVARD  
SUITE 202  
DANIA, FL 33004**

## 7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City **FL** Zip Code

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, 2007 Fee will be \$550.00**

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

## 10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete  
NAME **BAUDRY-CHISHOLM, MARIE FRANCE**  
STREET ADDRESS **1585 LANDS END ROAD**  
CITY-ST-ZIP **MANALAPAN, FL 33462**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition  
NAME **BAUDRY-CHISHOLM, MARIE FRANCE**  
STREET ADDRESS **201 S. NARCISSUS AV. # 804**  
CITY-ST-ZIP **WEST PALM BEACH FL 33401**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: **Marie France Baudry-Chisholm**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **April 5, 2007** Daytime Phone #