

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004724

Entity Name: E & D SERVICES II, INC.

FILED
Mar 29, 2009
Secretary of State

Current Principal Place of Business:

4220 SW 71ST WAY
DAVIE, FL 33314

New Principal Place of Business:

871 NW 85TH TERRACE
1709
PLANTATION, FL 33324

Current Mailing Address:

4220 SW 71ST WAY
DAVIE, FL 33314

New Mailing Address:

871 NW 85TH TERRACE
1709
PLANTATION, FL 33324

FEI Number: 03-0504391

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIMPSON, ELLEN P PRES
4220 SW 71ST WAY
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

SIMPSON, ELLEN P PRES
871 NW 85TH TERRACE
1709
PLANTATION, FL 33324 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:

03/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: SIMPSON, ELLEN P
Address: 4220 SW 71ST WAY
City-St-Zip: DAVIE, FL 33314

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: SIMPSON, ELLEN P
Address: 871 NW 85TH TERRACE
City-St-Zip: PLANTATION, FL 33324

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: ELLEN SIMPSON

PRES

03/29/2009

Electronic Signature of Signing Officer or Director

Date