

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000015306

Entity Name: V.N.W. SERVICES, CORP.

FILED  
Apr 28, 2008  
Secretary of State

**Current Principal Place of Business:**

4100 EVANS AVENUE  
SUITE 10  
FORT MYERS, FL 33901

**New Principal Place of Business:**

**Current Mailing Address:**

P.O BOX 7386  
FORT MYERS, FL 33911

**New Mailing Address:**

FEI Number: 59-3777732

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OLIVEIRA, WASHINGTON A  
1801 ACADEMY BLVD  
CAPE CORAL, FL 33990 US

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

SILVA, VALDECI  
P.O BOX 7386  
FORT MYERS, FL 33911 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: VALDECI SILVA

04/28/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: OLIVEIRA, WASHINGTON A  
Address: 1801 ACADEMY BLVD  
City-St-Zip: CAPE, CORAL, FL 33990

Title: VD ( ) Delete  
Name: FERREIRA, DENISE F  
Address: 1801 ACADEMY BLVD  
City-St-Zip: CAPE, CORAL, FL 33999

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

Title: PD (X) Change ( ) Addition  
Name: SILVA, VALDECI  
Address: P.O BOX 7386  
City-St-Zip: FORT MYERS, FL 33911

Title: VD (X) Change ( ) Addition  
Name: SILVA, EMERSON  
Address: P.O BOX 7386  
City-St-Zip: FORT MYERS, FL 33911

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: VALDECI SILVA

P

04/28/2008

Electronic Signature of Signing Officer or Director

Date