

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J86342

FILED
Mar 10, 2009
Secretary of State

Entity Name: ENGINEERING DESIGN TECHNOLOGIES CORP.

Current Principal Place of Business:

1411 N. WESTSHORE BLVD., STE. 202
P.O. BOX 152403
TAMPA, FL 33684

New Principal Place of Business:

1411 N. WESTSHORE BLVD.
STE. 202
TAMPA, FL 33607 US

Current Mailing Address:

1411 N. WESTSHORE BLVD., STE. 202
P.O. BOX 152403
TAMPA, FL 33684

New Mailing Address:

P.O. BOX 152403
TAMPA, FL 33684 US

FEI Number: 59-2836073

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HALLMAN, BOB E.
1411 N WESTSHORE ST 202
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

HALLMAN, BOB E.
1411 N WESTSHORE BLVD.
STE. 202
TAMPA, FL 33607 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:

03/10/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GONZALEZ, GLORIA I.,
Address: 1411 N WESTSHORE STE 202
City-St-Zip: TAMPA, FL

Title: SVD () Delete
Name: HALLMAN, BOB E.,
Address: 1411 N WESTSHORE STE 202
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: GONZALEZ, GLORIA I.,
Address: 1411 N WESTSHORE STE 202
City-St-Zip: TAMPA, FL 33607 US

Title: SVD (X) Change () Addition
Name: HALLMAN, BOB E.,
Address: 1411 N WESTSHORE STE 202
City-St-Zip: TAMPA, FL 33607 US

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: BOB E. HALLMAN

DVPS

03/10/2009

Electronic Signature of Signing Officer or Director

Date