

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000035767

FILED
Jan 18, 2004
Secretary of State

Entity Name: EASTSIDE REMODELING, INC.

Current Principal Place of Business:

2555 NW 11TH ST., APT. 501
FT. LAUDERDALE, FL 33304

New Principal Place of Business:

1160 N.FEDERAL HIGHWAY
817
FT LAUDERDALE, FL 33304

Current Mailing Address:

2555 NW 11TH ST., APT. 501
FT. LAUDERDALE, FL 33304

New Mailing Address:

1160 N.FEDERAL HIGHWAY
817
FT LAUDERDALE, FL 33304

FEI Number: 03-0426577

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PYE, THOMAS G ESQ.
408 W UNIVERSITY AVE STE 108
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VITA, WILTON
Address: 2555 NW 11TH ST., APT. 501
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: STD () Delete
Name: VITA, LINDA
Address: 2555 NW 11TH ST., APT. 501
City-St-Zip: FT. LAUDERDALE, FL 33304

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: VITA, WILTON
Address: 1160 N.FEDERAL HIGHWAY
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: STD (X) Change () Addition
Name: VITA, LINDA
Address: 1160 N.FEDERAL HIGHWAY
City-St-Zip: FT. LAUDERDALE, FL 33304

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: WILTON VITA

PD

01/18/2004

Electronic Signature of Signing Officer or Director

Date