## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000078269

Entity Name: ERM CONSTRUCTION CORP

FILED Jan 13, 2009 Secretary of State

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Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
	ENTRAL PKW	Υ			
1000 ALTAMON	ITE SPRINGS	s, FL 32714			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
	ENTRAL PKW	Υ			
1000 ALTAMON	ITE SPRINGS	s, FL 32714			
FEI Number	: 04-3703099	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
MELAMED, ELI 405 W. CENTRAL PKWY ALTAMONTE SPRINGS, FL 32714 US			1000	405 W. CENTRAL PKWY	
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				01/13/2009	
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	MELAMED, ÈI 405 CENTRAL	) Delete .I .PKWY SUITE 1000 SPRINGS, FL 32714	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name: Address: City-St-Zip:	MELAMED, UI 405 W CENTR	) Delete DI JAL PKWY SUITE 1000 SPRINGS, FL 32714	Title: ( Name: Address: City-St-Zip:	) Change ()Addition	
Title: Name:	S ( MELAMED, RI	) Delete TA	Title: ( Name:	) Change ( ) Addition	

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.

Address:

City-St-Zip:

SIGNATURE: ELI MELAMED PRES 01/13/2009

405 W. CENTRAL PKWY SUITE 1000

ALTAMONTE SPRINGS, FL 32714

Address: City-St-Zip: