

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000043309

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** ED VITAL CONSTRUCTION SERVICES, INC.

**Current Principal Place of Business:**

12776 62ND LANE NORTH  
WEST PALM BEACH, FL 33412

**New Principal Place of Business:**

13750 CEDAR BLUFF CT  
DAVIE, FL 33325

**Current Mailing Address:**

12776 62ND LANE NORTH  
WEST PALM BEACH, FL 33412

**New Mailing Address:**

13750 CEDAR BLUFF CT  
DAVIE, FL 33325

**FEI Number:** 51-0460405

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VITAL, ED  
12776 62ND LANE NORTH  
WEST PALM BEACH, FL 33412 US

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

VITAL, ED  
13750 CEDAR BLUFF CT  
DAVIE, FL 33325 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:** JAIME SCJARRETTI VITAL

03/04/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** DPS  
**Name:** VITAL, ED  
**Address:** 13750 CEDAR BLUFF CT  
**City-St-Zip:** DAVIE, FL 33325

I hereby 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 all other like empowered.

**SIGNATURE:** JAIME SCJARRETTI VITAL

OWNE

03/04/2010

Electronic Signature of Signing Officer or Director

Date