2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000076622

FILED Feb 11, 2009 Secretary of State

Entity Name: SOUTHLAND CONSTRUCTION SERVICES, INC.

urrent P	rincipal Place	or business:	New Principal Place	or business:
605 US F AMPA, F	1WY 92E. L 33610 US	3		
urrent N	lailing Addres	s:	New Mailing Address	s:
605 US F AMPA, F	HWY 92E. L 33610 US	5		
El Number	: 32-0084936	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
lame and	l Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
	E, DOUGLAS M S HIGHWAY 92 L 33610 US			
	named entity se of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
	e of Florida.	submits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,
the State	e of Florida. É	submits this statement for the particles in the particles of Signature of Registered Ag		d office or registered agent, or both, Date
n the State	e of Florida. RE: Electron			
n the State	e of Florida. RE: Electron	ic Signature of Registered Ag	ent	
n the State	e of Florida. RE: Electron mpaign Financing S AND DIREC	ic Signature of Registered Aggrups of Trust Fund Contribution (). TORS: Delete RICK J I DRIVE	ent	Date
n the State SIGNATUI Iection Car DFFICER: itle: ame: ddress:	e of Florida. RE: Electron mpaign Financing S AND DIREC P () LAMBETH, PAT 22018 CARSON LAND O LAKES	ic Signature of Registered Age Trust Fund Contribution (). TORS: Delete RICK J I DRIVE , FL 34639 US Delete RANDAL CT.	ent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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: RANDAL NIEDERMAIER S/T 02/11/2009