

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102554

FILED
Apr 30, 2008
Secretary of State

Entity Name: ALMEIDA ENTERPRISES OF BREVARD, INC.

Current Principal Place of Business:

360 THOR AVE. S.E.
UNIT # 5
PALM BAY, FL 32909

New Principal Place of Business:

Current Mailing Address:

360 THOR AVE. S.E.
UNIT # 5
PALM BAY, FL 32909

New Mailing Address:

FEI Number: 80-0077812 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALMEIDA, DAWN G
8185 129 CT
SEBASTIAN, FL 32958 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: D () Delete
Name: ALMEIDA, DAWN G
Address: 8185 129 CT
City-St-Zip: SEBASTIAN, FL 32958

Title: O () Delete
Name: ALMEIDA, FRANK D
Address: 400 OSPREY DR.
City-St-Zip: BAREFOOT BAY, FL 32976

Title: O () Delete
Name: ALMEIDA, JOSEPH F
Address: 4912 CURRIER CT. APT. # 8
City-St-Zip: MELBOURNE, FL 32905

Title: O () Delete
Name: ALMEIDA, JOHN R
Address: 8185 129 TH. CT.
City-St-Zip: SEBASTIAN, FL 32958

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ALMEIDA, DAWN G
Address: 8185 129 CT
City-St-Zip: SEBASTIAN, FL 32958

Title: VPD (X) Change () Addition
Name: ALMEIDA, FRANK D
Address: 400 OSPREY DR.
City-St-Zip: BAREFOOT BAY, FL 32976

Title: VPD (X) Change () Addition
Name: ALMEIDA, JOSEPH F
Address: 4912 CURRIER CT. APT. # 8
City-St-Zip: MELBOURNE, FL 32905

Title: STD (X) Change () Addition
Name: ALMEIDA, JOHN R
Address: 8185 129 TH. CT.
City-St-Zip: SEBASTIAN, FL 32958

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: DAWN ALMEIDA

PD

04/30/2008

Electronic Signature of Signing Officer or Director

_____ Date