## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000100934

Entity Name: VIDI CONTRACTORS, CORP

FILED Jan 22, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

7145 NW MIAMI LAKES DR., UNIT R-20 1719 NE MIAMI GARDENS DR # 233 MIAMI, FL 33014

233

NORTH MIAMI BEACH, FL 33179

**Current Mailing Address: New Mailing Address:** 

7145 NW MIAMI LAKES DR., UNIT R-20 1719 NE MIAMI GARDENS DR # 233

MIAMI, FL 33014

NORTH MIAMI BEACH, FL 33179

FEI Number: 20-1342043 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PENUELA, VICENTE J DANITZA, MONCALIANO C 6555 N.W. 36TH STREET 1719 NE MIAMI GARDENS DR # 233

#317 MIAMI, FL 33166 US NORTH MIAMI BEACH, FL 33179 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: DANITZA C MONCALIANO 01/22/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: ( ) Delete PENUELA, VICENTE J Name:

6555 NW 36TH STREET #317 Address: City-St-Zip: MIAMI, FL 33166

VΡ Title: () Delete Name: MONCALIANO, DANITZA

6555 NW 36TH STREET #317 Address: MIAMI, FL 33166 City-St-Zip:

( ) Delete Title: SD MONCALIANO, DANITZA Name:

6555 NW 36TH STREET #317 Address: City-St-Zip: MIAMI, FL 33166

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition

DANITZA, MONCALIANO C Name:

1719 NE MIAMI GARDENS DR # 233 Address: City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: (X) Change ( ) Addition

Name: VICENTE, PENUELA J

1719 NE MIAMI GARDENS DR #233 Address: NORTH MIAMI BEACH, FL 33179 City-St-Zip:

Title: (X) Change ( ) Addition SD

MONCALIANO, DANITZA C Name:

1719 NE MIAMI GARDENS DR #233 Address: City-St-Zip: NORTH MIAMI BEACH, FL 33179

I hereby certify that the information supplied with this filing does not qualify for the 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: DANITZA MONCALIANO PD 01/22/2007