2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013804

Entity Name: FIDELITY CUSTOM SERVICES, CORP.

FILED Feb 12, 2007 Secretary of State

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

555 SW BAILEY TERR
555 SW BAILEY TERRACE
PORT ST LUCIE, FL 34953 US
555 SW BAILEY TERRACE
PORT ST LUCIE, FL 34953 US

Current Mailing Address: New Mailing Address:

555 SW BAILEY TERR 555 SW BAILEY TERRACE PORT ST LUCIE, FL 34953 US PORT ST LUCIE, FL 34953 US

FEI Number: 20-2238253 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:

TAVARES, LEONARDO
555 SW BAILEY TERR
555 SW BAILEY TERRACE
PORT ST LUCIE, FL 34953 US
555 SW BAILEY TERRACE
PORT ST LUCIE, FL 34953 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: LEONARDO TAVARES 02/12/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition TAVARES, LEONARDO Name: Name: TAVARES, LEONARDO 555 SW BAILEY TERRACE 555 SW BAILEY TERRACE Address: Address: City-St-Zip: PORT ST. LUCIE, FL 34953 City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: D () Delete Title: D (X) Change () Addition Name: OLIVEIRA, ROBERTY Name: OLIVEIRA, ROBERTY

Name:OLIVEIRA, ROBERTYName:OLIVEIRA, ROBERTYAddress:555 SW BAILEY TERRACEAddress:555 SW BAILEY TERRACECity-St-Zip:PORT ST. LUCIE, FL 34953City-St-Zip:PORT ST. LUCIE, FL 34953 US

Title: D () Delete Title: D (X) Change () Addition

Name:MARCOS ALEXANDRE SIL, VAName:SILVA, MARCOS AAddress:4721 NW WESLEY RD4721 NW WESLEY RD.City-St-Zip:PORT ST LUCIE, FL 34986City-St-Zip:PORT ST LUCIE, FL 34986 US

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: LEONARDO TAVARES PD 02/12/2007