

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000018546

Entity Name: VIDAL ENTERPRISES, INC.

FILED
Jan 29, 2009
Secretary of State

Current Principal Place of Business:

485 AUTUMN DAMASK CT
OCOE, FL 34761

New Principal Place of Business:

Current Mailing Address:

485 AUTUMN DAMASK CT
OCOE, FL 34761

New Mailing Address:

FEI Number: 20-2216136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VIDAL, ENEDINA
485 AUTUMN DAMASK CT
OCOE, FL 34761 US

Name and Address of New Registered Agent:

VIDAL, RAMON E
485 AUTUMN DAMASK CT
OCOE, FL 34761 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: RAMON E VIDAL

01/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: VIDAL, RAMON E
Address: 485 AUTUMN DAMASK CT
City-St-Zip: OCOE, FL 34761

Title: P () Delete
Name: VIDAL-HANE, JESSIE
Address: 485 AUTUMN DAMASK CT
City-St-Zip: OCOE, FL 34761

Title: VT (X) Delete
Name: VIDAL, ENEDINA
Address: 485 AUTUMN DAMASK CT
City-St-Zip: OCOE, FL 34761

Title: S (X) Delete
Name: VIDAL, DENISE
Address: 485 AUTUMN DAMASK CT
City-St-Zip: OCOE, FL 34761

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: VIDAL, RAMON E
Address: 485 AUTUMN DAMASK CT
City-St-Zip: OCOE, FL 34761

Title: S/T/ (X) Change () Addition
Name: VIDAL, ENEDINA
Address: 485 AUTUMN DAMASK CT
City-St-Zip: OCOE, FL 34761

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RAMON E VIDAL

PRES

01/29/2009

Electronic Signature of Signing Officer or Director

Date