# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P05000034263

Entity Name: FUNDISA REMEDIATION COMPANY INC.

FILED Jun 04, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1802 WHARF LANE 915 COTTON BAY DR. E GREENACRES, FL 33463

1503

WEST PALM BEACH, FL 33406

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

1802 WHARF LANE 915 COTTON BAY DR. E

GREENACRES, FL 33463 1503

WEST PALM BEACH, FL 33406

FEI Number: 34-2039242 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:

SALAMANCA, ANGELO SALAMANCA, ANGELO 1802 WHARF LANE 915 COTTON BAY DR. E

GREENACRES, FL 33463 US 1503

WEST PALM BEACH, FL 33406 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: 06/04/2007

Electronic Signature of Registered Agent

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

### ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

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

SALAMANCA, ANGELO SALAMANCA, ANGELO Name: Name:

1802 WHARF LANE Address: 915 COTTON BAY DR. EAST, APT 1503 Address:

City-St-Zip: GREENACRES, FL 33463 City-St-Zip: WEST PALM BEACH, FL 33406

Title: VΡ () Delete Title: () Change () Addition

HERNANDEZ, MYRIAM Name: Name: 1802 WHARF LANE Address: Address: GREENACRES, FL 33463 City-St-Zip: 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.

Ρ SIGNATURE: ANGELO SALAMANCA 06/04/2007