

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128527

FILED  
Apr 29, 2006  
Secretary of State

Entity Name: VALADAO PROFESSIONAL SERVICES, CORP.

## Current Principal Place of Business:

2827 STONEWAY LANE, APT. A  
FORT PIERCE, FL 34982 US

## New Principal Place of Business:

## Current Mailing Address:

2827 STONEWAY LANE, APT. A  
FORT PIERCE, FL 34982 US

## New Mailing Address:

FEI Number: 20-3506163

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TAXPLACE, CORP  
2721 S. US 1 SUITE 9  
FORT PIERCE, FL 34982 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: PD ( ) Delete  
Name: VALADAO, CUSTODIO M  
Address: 2827 STONEWAY LANE, APT. A  
City-St-Zip: FORT PIERCE, FL 34982 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D ( ) Change (X) Addition  
Name: MATOS, JOSE C  
Address: 2827 STONEWAY LANE, APT. A  
City-St-Zip: FORT PIERCE, FL 34982 US

Title: D ( ) Change (X) Addition  
Name: CARMO, GILMAR  
Address: 608 PETALS RD  
City-St-Zip: FORT PIERCE, FL 34947 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: CUSTODIO M. VALADAO

PD

04/29/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date