## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P05000150865

City-St-Zip:

Entity Name: VALCOM DESIGN & CONSTRUCTION INC.

FILED Mar 12, 2009 Secretary of State

Littly Nai	IIIE. VALCOIVI	DESIGN & CONSTRUCTION	DIN, IINC.				
Current Principal Place of Business:				New Principal Place of Business:			
2328 TENTH AVE NORTH, SUITE 501 LAKE WORTH, FL 33461				2328 TENTH AVE NORTH, SUITE 501			
				501 LAKE WORTH, FL 33461			
Current Mailing Address:				New Mailing Address:			
2328 TENTH AVE NORTH, SUITE 501 LAKE WORTH, FL 33461				2328 TENTH AVE NORTH, SUITE 501 501 LAKE WORTH, FL 33461			
FEI Number:	: 51-0559780	FEI Number Applied For ( )	FEI Nur	mber Not Appl	icable ( )	Certificate of Status Des	sired()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
#501 LAKE WO The above	I AVE NORTH RTH, FL 3346	1 US submits this statement for th	e purpose c	of changing i	ts registered	office or registered age	nt, or both,
SIGNATU							
	Electron	iic Signature of Registered A	Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P ( ) VALDERRAMA, 2328 10TH AVE LAKE WORTH,	NORTH #501		Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	( )	Delete		Title: Name: Address: City-St-Zip:	VALDERRAM	É NORTH #501	

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: LUIS VALDERRAMA Ρ 03/12/2009