2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000026690

Address:

City-St-Zip:

Entity Name: EL SHADDAI CONTRACTORS INC

761 SIESTA KEY CIR APT # 1718

DEERFIELD BEACH, FL 33441

FILED Mar 11, 2008 Secretary of State

y		// BB/ ((CC) (1)	TO TORO II VO.						
Current Principal Place of Business:					New Principal Place of Business:				
750 E. SAMPLE RD., BLDG 4 BAY 7 POMPANO BEACH, FL 33064					1981 NW 21ST ST BAY 3 POMPANO BEACH, FL 33069				
Current Mailing Address:					New Mailing Address:				
750 E. SAMPLE RD., BLDG 4 BAY 7 POMPANO BEACH, FL 33064					1981 NW 21ST ST BAY 3 POMPANO BEACH, FL 33069				
FEI Number	: 20-4382076	FEI Numb	er Applied For()	FEI Num	ber Not Appli	icable ()	Certifica	te of Status D	esired (X)
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:				
MARGATE The above	WOOD LN E, FL 33063	3 US ity submits this	s statement for the p	ourpose of	⁻ changing it	s registere	d office or re	egistered ag	ent, or both,
SIGNATUI									
		tronic Signatur	e of Registered Age	ent				Date	
Election Car	mpaign Finar	ncing Trust Fund	Contribution ().						
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	PTD RIBEIRO, 0 3185 DOG\ MARGATE,	WOOD LN			Title: Name: Address: City-St-Zip:		()Change() Addition	
Title: Name: Address: City-St-Zip:	V SOARES, F 3185 DOGY MARGATE,	WOOD LN			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	V SOARES, F	() Delete			Title: Name:	V SOARES, P	(X) Change(() Addition	

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.

Address:

City-St-Zip:

705 MERMAID DR APT 111

DEERFIELD BEACH, FL 33441

SIGNATURE: PHILIP Q SOARES V 03/11/2008