2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000055786

Entity Name: ED'S MAINTENANCE, INC.

FILED Apr 16, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6411 N.E. 18TH TERRACE 520 E MCNAB RD FORT LAUDERDALE, FL 33308

SUITE # 16

POMPANO BEACH, FL 33060

Current Mailing Address: New Mailing Address:

520 E MCNAB RD 6411 N.E. 18TH TERRACE

SUITE # 16 FORT LAUDERDALE, FL 33308

POMPANO BEACH, FL 33060

FEI Number: 20-4750293 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FLORES, DAVID FLORES, DAVID 6411 N.E. 18TH TERRACE 520 E MĆNAB RD

FORT LAUDERDALE, FL 33308 US SUITE # 16

POMPANO BEACH, FL 33060 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: DAVID FLORES 04/16/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

FLORES, DAVID Name: Name: FLORES, DAVID

6411 N.E. 18TH TERRACE 520 E MCNAB RD SUITE # 16 Address: Address: City-St-Zip: FORT LAUDERDALE, FL 33308 City-St-Zip: POMPANO BEACH, FL 33060

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

BALISTRERI, LEO Name: Name: 2930 NE 11TH TERR Address: Address: POMPANO BEACH, FL 33062 City-St-Zip: City-St-Zip:

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

COLLADA, IRENE Name: Name: 3204 NE 9TH ST APT 3 Address: Address: City-St-Zip: POMPANO BEACH, FL 33062 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: DAVID FLORES **PSTD** 04/16/2009