

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000023251

FILED
Apr 29, 2008
Secretary of State

Entity Name: VIDA GROUP CORPORATION

Current Principal Place of Business:

800 CELEBRATION AVE
SUITE 227
CELEBRATION, FL 34747 US

New Principal Place of Business:

Current Mailing Address:

1116 POINTE NEWPORT TERRACE
APT 110
CASSELBERRY, FL 32707 US

New Mailing Address:

P.O. BOX 181941
CASSELBERRY, FL 32718 US

FEI Number: 20-8557890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ITMCI BUSINESS SOLUTIONS
177 LONGVIEW AVE
CELEBRATION, FL 34747 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: P () Delete
Name: LEWIS, SHIRLEY
Address: 1116 POINTE NEWPORT TERRACE APT 110
City-St-Zip: CASSELBERRY, FL 32707 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEWIS, SHIRLEY
Address: 225 HANCOCK COURT
City-St-Zip: CASSELBERRY, FL 32707 US

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: SHIRLEY LEWIS

P

04/29/2008

Electronic Signature of Signing Officer or Director

_____ Date