

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000011375

Entity Name: I.D.S. ENTERPRISES, INC.

FILED  
Apr 15, 2008  
Secretary of State

## Current Principal Place of Business:

2750 OLD LAKE ALFRED RD.  
LAKE ALFRED, FL 338503063 US

## New Principal Place of Business:

2930 APPALACHIAN TRAIL  
POLK CITY, FL 33868 US

## Current Mailing Address:

P O BOX 2085  
WINTER HAVEN, FL 338832085 US

## New Mailing Address:

POST OFFICE BOX 2085  
WINTER HAVEN, FL 338832085 US

FEI Number: 65-0465185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GRAVIS, ANA MARIA PRESIDE  
405 N CITRUS GROVE BLVD  
POLK CITY, FL 33868 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 (X).

## OFFICERS AND DIRECTORS:

Title: PVTS ( ) Delete  
Name: GRAVIS, ANA MARIA PRESIDE  
Address: 405 N CITRUS GROVE BLVD  
City-St-Zip: POLK CITY, FL 33868

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: ANA MARIA GRAVIS

PRES

04/15/2008

Electronic Signature of Signing Officer or Director

Date