

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2008 8:00 am
Secretary of State

05-07-2008 90104 014 ***150.00

DOCUMENT # P94000062793 1. Entity Name VC EXCAVATORS USA, INC.			
Principal Place of Business 2715 BADGER RD LAKELAND, FL 33811 US		Mailing Address 2715 BADGER RD LAKELAND, FL 33811 US	
2. Principal Place of Business - No P.O. Box # 7220 MILLBROOK OAKS DR		3. Mailing Address 7220 MILLBROOK OAKS DR	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State LAKELAND, FL		City & State LAKELAND, FL	
Zip 33813		Zip 33813	
Country USA		Country USA	
4. FEI Number 59-3267203		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CHRITTON, CHARLES P 5300 SOUTH FLORIDA AVE. LAKELAND, FL 33813		7. Name and Address of New Registered Agent Name: PETE FLOOD Street Address (P.O. Box Number is Not Acceptable): 7220 MILLBROOK OAKS DR City: LAKELAND FL Zip Code: 33813	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: <i>Pete Flood</i> OWNER DATE: 4/30/08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P NAME FLOOD, PETE M STREET ADDRESS 7220 MILLBROOK OAKS DR CITY-ST-ZIP LAKELAND, FL 33813	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Pete Flood</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: 4/30/08 Daytime Phone #: (863) 670-1135	