

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000003243

FILED
Mar 17, 2006
Secretary of State

Entity Name: EDEA AND ASSOCIATES SERVICES GROUP, INC.

Current Principal Place of Business:

202 EAST 36 STREET
HIALEAH, FL 33013

New Principal Place of Business:

20403 SUGARLOAF MOUNTAIN ROAD
CLERMONT, FL 34715

Current Mailing Address:

202 EAST 36 STREET
HIALEAH, FL 33013

New Mailing Address:

P.O.BOX 876
MINNEOLA, FL 34755

FEI Number: 65-0813390

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE ACOSTA, EMILIO
202 EAST 36 STREET
HIALEAH, FL 33013 US

Name and Address of New Registered Agent:

DE ACOSTA, EMILIO
20403 SUGARLOAF MOUNTAIN ROAD
CLERMONT, FL 34715 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: EMILIO DE ACOSTA

03/17/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: DE ACOSTA, EMILIO
Address: 202 EAST 36 STREET
City-St-Zip: HIALEAH, FL 33013

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: DE ACOSTA, EMILIO
Address: 20403 SUGARLOAF MOUNTAIN ROAD
City-St-Zip: CLERMONT, FL 34715

I hereby certify that the information supplied with this filing does not qualify for the 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: EMILIO DE ACOSTA

DP

03/17/2006

Electronic Signature of Signing Officer or Director

Date