# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 02, 2009**
**Secretary of State**

DOCUMENT# P99000031744

**Entity Name:** WOOD MENDES, INC.

**Current Principal Place of Business:**

2301 NW 33RD CT
109
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

2301 NW 33RD CT
109
POMPANO BEACH, FL 33069

**New Mailing Address:**

**FEI Number: 65-0909668** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

MENDES, FELIPE C
23246 SW 61ST AVE
BOCA RATON, FL 33428 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: PVST ( ) Delete
Name: MENDES, FELIPE C
Address: 23246 SW 61ST AVE
City-St-Zip: BOCA RATON, FL 33428

Title: D ( ) Delete
Name: MENDES, FELIPE E
Address: 23246 SW 61ST AVE
City-St-Zip: BOCA RATON, FL 33428

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PSTD (X) Change ( ) Addition
Name: MENDES, FELIPE C
Address: 23246 SW 61ST AVE
City-St-Zip: BOCA RATON, FL 33428

Title: VPD (X) Change ( ) Addition
Name: GOMES, AIDA M
Address: 23246 SW 61ST AVE
City-St-Zip: BOCA RATON, FL 33428

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: FELIPE C MENDES PSTD 02/02/2009

Electronic Signature of Signing Officer or Director — Date