2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2008 08:00 AN Secretary of State

DOCI	UMENT	# P990001	106353

1. Entity Name

V & C MACHADO ESCAVATION SERVICES INC.



Principal Place of Business

3420 NW 95 TER MIAMI, FL 33147 Mailing Address

3420 NW 95 TER MIAMI, FL 33147



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03192008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0984177

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

MACHADO, VICTOR 3420 NW 95 TER MIAMI, FL 33147

DO NOT WRITE IN THIS SPACE

Date

Daytime Phone #

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 SIGNATURE						
	Signature, typed or printed name of registered agent and title if	applicable. (NOTE, Registered	Agent signature	erequired when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees		
.10.	OFFICERS AND DIREC	TORS			U00000931244	
NAME STREET ADDRESS CITY-SI-ZIP	D MACHADO, VICTOR 3420 NW 95 TER MIAMI, FL 33147				000000331244 U5/22/U8-80007-006 150.09	
NAME STREET ADDRESS CITY-ST-ZIP	D MACHADO, CLAUDIA 3420 NW 95 TER MIAMI, FL 33147					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 eath; that I am an efficier or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Piorida 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.						

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR