## F04000001553

(Requestor's Name)							
(Address)							
(Address)							
. (City/State/Zip/Phone #)							
(Otty/Otate/Elp/i Hollow)							
. PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
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Office Use Only



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SECRETARY OF STATE

T. Reports NOV 27 2007



November 12, 2007

FLORIDA SECRETARY OF STATE **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: ENGLOBAL CONSTRUCTION RESOURCES, INC.

Dear Filing Officer:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations, for the above referenced name, which is to be filed in your office. Also enclosed is check #14027 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions, please contact x353 at 800-345-4647.

Thank you,

MSH

Myra Simmons-Homer Registered Agent Services

Enclosures

PO BOX 1831 AUSTIN, TX 78767

## **COVER LETTER**

TO: Amer Divis	ndment Section sion of Corporations							
SUBJECT:_	ENGLOBAL TECHNICA (Name of C	L SERVICES, INC.						
DOCUMEN	T NUMBER: F04000001553							
The enclosed	Statement of Change of Registered Office	e/Agent and fee are submitted for filing.						
Please return	all correspondence concerning this matte	r to the following:						
	Myra Homer (Name of Contact Person)							
	•	,						
	Capitol Corporate Services, Inc. (Firm/Company)							
	800 Brazos, Suite 400(Address)							
	Austin, Tex (City/State a	ras 78701 nd Zip Code)						
For further in	formation concerning this matter, please of	call:						
	Myra Homer (Name of Contact Person)	at ( <u>800</u> ) <u>345-4647</u> (Area Code & Daytime Telephone Number)						
Enclosed is a	\$35.00 check made payable to the Depart	ment of State.						
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building						

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

`								
statement of ch	provisions of sections 607. ange is submitted for a corp er to change its registered o	poration organiz	ed under the	laws of the State	e of TEXAS	<u>s</u>	_	
1. The name of	the corporation:	ENGLOB	AL TECH	NICAL SER	VICES, I	INC.		
2. The principal	office address: 654 N. Sa	m Houston Pk	му, Е., #400	, Houston, TX	77060	<u>-</u>	<u> </u>	
3. The mailing of	address (if different):							
4. Date of incor	poration/qualification: 3/1	2/2004	Docume	nt number: <u>F04</u>	000001553	3		_
	d street address of the curre rtment of State:	ent registered age	ent and registe	ered office on fi	le with the			
	C T Corporation System	m				<del>=</del>		
	1200 South Pine Island	i Road				SECR SECR	)7 N	
<u></u>	Plantation, FL 33324		<u>-</u>			ETAR)	) I AC	7 =
6. The name and (if changed):	d street address of the new		(if changed) :	and for registere	d office	RY OF STA	07 NOV 19 PM 1:	רבט
	Capitol Corporate Serv	ices, Inc.			<del></del>	REA		
	155 Office Plaza Drive,	Suite A ox NOT acceptable)	<u> </u>	<del></del>	<del></del>			
	Tallahassee		Florida	32301	<u></u>			
The street address changed will	ess of its registered office l be identical.	and the street a	ddress of the	business office	of its regis	stered age	ent,	
Such change waythorized by t	as authorized by resolution he board, or the corporation	n duly adopted l on has been noti	by its board of the distribution in the distri	of directors or b	y an office	r so		
Watale (Signal)	ure or an officer or director)	•		S. Hairsto		etary		
I hereby accept I further agree of my duties, ar document is be corporation ha	the appointnent as regist to comply with the provisi ad I am familiar with and t ing filed merely to reflect to s been notified in writing t	tered agent and ions of all statut accept the oblig a change in the of this change.	agree to act es relative to ation of my p registered of	in this capacity the proper and position as regis fice address, I	, d complete stered agen hereby conj	performa it. Or if firm that	nce this the	
Dela	nie Case			11-9-0	7		_	
	gnature of Registered Agent)	_ <del></del>		(Date)				
If signing on be	ehalf of an entity:							
Delanie Case, Ass	st. Secretary on Behalf of Capito	I Corporate Service	s, Inc.					

\* \* \* FILING FEE: \$35.00 \* \* \*

(Typed or Printed Name)