

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005679

FILED
Jan 26, 2006
Secretary of State

Entity Name: BOND GROUP CONSTRUCTION, INC.

Current Principal Place of Business:

4126 ASH-LITTLE RIVER ROAD
ASH, NC 28420

New Principal Place of Business:

6810-C
OCEAN ISLE BEACH, NC 28469

Current Mailing Address:

P.O. BOX 100
ASH, NC 28420

New Mailing Address:

PO BOX 8110
OCEAN ISLE BEACH, NC 28469

FEI Number: 20-0233591

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LONG, JIM
2543 CHAPALA DRIVE
KISSIMMEE, FL 34746 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: PD () Delete
Name: LONG, JIM
Address: P.O. BOX 100
City-St-Zip: ASH, NC 28420

Title: VD () Delete
Name: BROWN, JERRY
Address: P.O. BOX 100
City-St-Zip: ASH, NC 28420

Title: SVC () Delete
Name: RUSS, BARBARA
Address: P.O. BOX 100
City-St-Zip: ASH, NC 28420

Title: T () Delete
Name: BROWN, SUSAN
Address: P.O. BOX 100
City-St-Zip: ASH, NC 28420

Title: C () Delete
Name: FANG, XIAOLIAN
Address: P.O. BOX 100
City-St-Zip: ASH, NC 28420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LONG, JIM
Address: PO BOX 8110
City-St-Zip: OCEAN ISLE BEACH, NC 28469

Title: VD (X) Change () Addition
Name: BROWN, JERRY
Address: PO BOX 8110
City-St-Zip: OCEAN ISLE BEACH, NC 28469

Title: SVC (X) Change () Addition
Name: RUSS, BARBARA
Address: PO BOX 8110
City-St-Zip: OCEAN ISLE BEACH, NC 28469

Title: T (X) Change () Addition
Name: BROWN, SUSAN
Address: PO BOX 8110
City-St-Zip: OCEAN ISLE BEACH, NC 28469

Title: C (X) Change () Addition
Name: FANG, XIAOLIAN
Address: PO BOX 8110
City-St-Zip: OCEAN ISLE BEACH, NC 28469

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: JIM LONG

PD

01/26/2006

Electronic Signature of Signing Officer or Director

_____ Date