2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000005947

Address:

City-St-Zip:

3500 HEARTHSTONE PLACE

DOUGLASVILLE, GA 30135

Entity Name: AMR CONTRACTING, INC.

FILED Apr 25, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3110 SURF WAY, UNIT 1 1038 GOLDENROD RD SINGER ISLAND, FL 33404 WELLINGTON, FL 33414 **Current Mailing Address: New Mailing Address:** 3500 HEARTHSTONE PLACE DOUGLASVILLE, GA 30135 FEI Number: 72-1395215 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JONES, TERESA C JONES, TERESA C 3285 LÁKE WORTH ROAD, SUITE F 1038 GOLDENROD RD LAKE WORTH, FL 33461 US WELLINGTON, FL 33414 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: TERESA C. JONES 04/25/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PCD () Delete Title: () Change () Addition Name: JONES, TERESA C Name: 3500 HEARTHSTONE PLACE Address: Address: City-St-Zip: DOUGLASVILLE, GA 30135 City-St-Zip: () Delete Title: Title: () Change () Addition Name: JONES, TERESA C Name: 3500 HEARTHSTONE PLACE Address: Address: DOUGLASVILLE, GA 30135 City-St-Zip: City-St-Zip: Title: Title: VS () Delete () Change () Addition JONES, J T JR. Name: Name: 3500 HEARTHSTONE PLACE Address: Address: City-St-Zip: DOUGLASVILLE, GA 30135 City-St-Zip: Title: CFO () Delete Title: () Change () Addition JONES, J T JR. Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

SIGNATURE: TERESA C. JONES **PRES** 04/25/2005