2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# H03179

Entity Name: M C TEST SERVICE, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
2755 KIRBY CIR PALM BAY, FL 32905 US	
Current Mailing Address:	**New Mailing Address:**
2755 KIRBY CIR PALM BAY, FL 32905 US	

FEI Number: 59-2414592   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:**
MCREYNOLDS, MARK 2755 KIRBY CIRCLE PALM BAY, FL 32905 US	

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

OFFICERS AND DIRECTORS:

Title: ST   ( ) Delete
Name: MCREYNOLDS, MARK
Address: 5075 SMITHFIELD RD.
City-St-Zip: MELBOURNE, FL 32934

Title: PD   ( ) Delete
Name: WINECKOSKI, TOM
Address: 220 LANSING DR.
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFTS   (X) Change ( ) Addition
Name: MCREYNOLDS, MARK
Address: 5075 SMITHFIELD RD.
City-St-Zip: MELBOURNE, FL 32934

Title: CEOP   (X) Change ( ) Addition
Name: MOORE, GEORGE W
Address: 2755 KIRBY CIR
City-St-Zip: PALM BAY, FL 32905

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: MARK MCREYNOLDS   CFO   08/28/2007

Electronic Signature of Signing Officer or Director   Date