

**2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Mar 28, 2006  
Secretary of State**

DOCUMENT# H65881

Entity Name: POLYPHASE CONSTRUCTION, INC.

**Current Principal Place of Business:**

13137 KANSAS AVE  
ASTATULA, FL 34705 US

**New Principal Place of Business:**

2096 WILD OKE CL.  
KISSIMMEE, FL 34746 US

**Current Mailing Address:**

13137 KANSAS AVE  
ASTATULA, FL 34705 US

**New Mailing Address:**

2096 WILD OKE CL.  
KISSIMMEE, FL 34746 US

FEI Number: 59-2548749      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ZEIS, DONALD W  
13137 KANSAS AVE  
ASTATULA, FL 34705 US

**Name and Address of New Registered Agent:**

WILKEN, CHAD L  
2096 WILD OKE CL  
KISSIMMEE, FL 34746 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: CHAD L WILKEN      03/28/2006  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: ZEIS, DONALD W  
Address: 13137 KANSAS AVE  
City-St-Zip: ASTATULA, FL 34705 FL

Title: VP ( ) Delete  
Name: WILKEN, GEORGE  
Address: 519 LAK AVE  
City-St-Zip: ORLANDO, FL 32801

Title: SEC. (X) Delete  
Name: APPENHEIMER, DONALD N  
Address: 2130 LEWIS RD.  
City-St-Zip: LEESBURG, FL 34748

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: WILKEN, CHAD L  
Address: 2096 WILD OKE CL  
City-St-Zip: KISSIMMEE, FL 34746 FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CHAD L WILKEN      PRES      03/28/2006  
Electronic Signature of Signing Officer or Director      Date