2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064143

Entity Name: ANCHOR SERVICES & CONSTRUCTION, INC.

FILED Jul 22, 2008 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:		
	EDERAL HWY	,		
#273 FORT LA	UDERDALE, F	FL 33304		
Current Mailing Address:		New Mailing Address:		
	SUNRISE BLVI ERDALE, FL			
FEI Numbe	r: 65-1125268	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name an	d Address of	Current Registered Agent:	Name and Address o	of New Registered Agent:
8551 W S	SARDEN, PAU SUNRISE BLVI ERDALE, FL	D STE 208		
	e named entity te of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,
	te of Florida. JRE:			d office or registered agent, or both,
in the Stat	te of Florida. JRE:	submits this statement for the onic Signature of Registered Ag		d office or registered agent, or both, Date
in the Sta	te of Florida. JRE: Electro			
in the States	te of Florida. JRE: Electro	onic Signature of Registered Acong Trust Fund Contribution ().	gent	
in the States	te of Florida. JRE: Electro ampaign Financi RS AND DIRECT PD (HEDRICK, RC 1007 N FEDE	onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete	gent	Date
in the State SIGNATU Election Ca OFFICER Title: Name: Address:	te of Florida. JRE: Electro ampaign Financia RS AND DIREC PD (HEDRICK, RC 1007 N FEDE FORT LAUDE VP (ASGHEDOM, 1007 N FEDE	onic Signature of Registered Aging Trust Fund Contribution (). CTORS:) Delete NALD RAL HWY #273 RDALE, FL 33304) Delete	gent ADDITIONS/CHANGI Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: ASGHEDOM BERHANE VP 07/22/2008