

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000088761

FILED
Apr 30, 2004
Secretary of State

Entity Name: CREDIT RESTORATION CONSULTANTS, INC.

Current Principal Place of Business:

4747 HOLLYWOOD BOULEVARD
PMB 260
HOLLYWOOD, FL 330216503 US

Current Mailing Address:

POST OFFICE BOX 220135
HOLLYWOOD, FL 33020135 US

New Principal Place of Business:

4263 DAVIE ROAD
2
DAVIE, FL 33314 US

New Mailing Address:

4263 DAVIE ROAD
2
DAVIE, F 33314 US

FEI Number: 65-1137124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, WILLIAM
4747 HOLLYWOOD BOULEVARD
260
HOLLYWOOD, FL 330216503 US

Name and Address of New Registered Agent:

LEWIS, WILLIAM
4263 DAVIE ROAD
2
DAVIE, FL 33314 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:

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: LEWIS, WILLIAM E JR
Address: POST OFFICE BOX 220135
City-St-Zip: HOLLYWOOD, FL 330220135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: LEWIS, WILLIAM E JR
Address: 4263 DAVIE ROAD, SUITE 2
City-St-Zip: DAVIE, FL 33314

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.

SIGNATURE: WILLIAM E. LEWIS, JR.

P

04/30/2004

Electronic Signature of Signing Officer or Director

Date