2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000007645

12103 70TH STREET

LARGO, FL 33773

Address:

City-St-Zip:

Entity Name: THE DEBT RELIEF CENTER INC

FILED Apr 10, 2006 Secretary of State

Entity Nai	me: THE DE	BI RELIEF CENTER, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
12103 70T LARGO, F	H STREET L 33773				
Current Mailing Address:			New Mailing Address:		
12103 70T LARGO, F	H STREET L 33773				
FEI Number:	: 04-3589750	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:		
941 FOUR MIAMI BEA	RTH STREET ACH, FL 331:	39 US			
	named entity e of Florida.	submits this statement for the p	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
Election Car	mpaign Financi	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (RUBINO, CRA 12103 70TH S LARGO, FL 3	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (SCHULTZ, FR 12103 70TH S LARGO, FL 3	STREET	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	D (RUBINO, CHE 12103 70TH S LARGO, FL 3	STREET	Address: 12103 70	(X) Change ()Addition ER, PAUL DTH STREET FL 33773	
Title: Name:	D (MILLER, WES	X) Delete SLEY	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PAUL BLEIGNIER D 04/10/2006