



2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2005 8:00 am
Secretary of State

05-09-2005 90288 015 ***158.75

DOCUMENT # P02000031987 1. Entity Name E & C DEVELOPMENT, INC.					
Principal Place of Business PO BOX 460639 FORT LAUDERDALE, FL 33316-0639				Mailing Address PO BOX 460639 FORT LAUDERDALE, FL 33316-0639	
2. Principal Place of Business 6370 Estate Frydendahl		3. Mailing Address 6370 Estate Frydendahl		14017486 	
Suite, Apt. #, etc. #20		Suite, Apt. #, etc. #20		04282005 Chg-P CR2E034 (10/03)	
City & State St. Thomas VI		City & State St. Thomas VI		4. FEI Number 72-1194021	
Zip 00802		Zip 00802		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
Country US		Country US		Applied For Not Applicable	
6. Name and Address of Current Registered Agent ROSENBERG, CHRISTIAN F 2100 S. OCEAN DRIVE #9J SKY HAROUR EAST FORT LAUDERDALE, FL 33316				7. Name and Address of New Registered Agent Name Christian F. Rosenberg Street Address (P.O. Box Number is Not Acceptable) 1335 Ponce de Leon Drive City Fort Lauderdale FL Zip Code 33316	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS ROSENBERG, CHRISTIAN F PO BOX 460639 FORT LAUDERDALE, FL 33316	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1335 Ponce de Leon Drive FORT Lauderdale, FL 33316	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with another life empowered.					
SIGNATURE _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Christian F. Rosenberg Date 4/29/05 Daytime Phone # 340-775-7007		