

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000004815

FILED
Sep 24, 2009
Secretary of State**Entity Name:** ENGINEERING RESOURCES GROUP, INC.**Current Principal Place of Business:**2760 W 79 ST.
HIALEAH, FL 33016**New Principal Place of Business:****Current Mailing Address:**2625 SW 132 WAY
DAVIE, FL 33330**New Mailing Address:****FEI Number:** 81-0591760**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROSS, CHRIS
2625 SW 132 WAY
DAVIE, FL 33330 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:**

Title: PSTD () Delete
Name: ROSS, CHRIS
Address: 2625 SW 132 WAY
City-St-Zip: DAVIE, FL 33330

Title: VP () Delete
Name: JITTAN-ROSS, LISA S
Address: 2625 SW 132 WAY
City-St-Zip: DAVIE, FL 33330

Title: VP (X) Delete
Name: RIERA, ADRIAN
Address: 9308 JAMAICA AVENUE
City-St-Zip: MIAMI, FL 33189

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: CHRIS ROSS

PSTD

09/24/2009

Electronic Signature of Signing Officer or Director_____
Date