2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056752

Entity Name: LIFE ENRICHMENT RESOURCES, INC.

FILED Feb 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1200 GULF BLVD 529 RIMINI VISTA WAY

SUITE1606 SUN CITY CENTER, FL 33573 CLEARWATER, FL 33767

New Mailing Address: Current Mailing Address:

1200 GULF BLVD 529 RIMINI VISTA WAY

SUN CITY CENTER, FL 33573 **SUITE 1606**

CLEARWATER, FL 33767

FEI Number: 01-0784461 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

ESTADT, BARRY K ESTADT, BARRY K 1200 GULF BLVD. 529 RIMINI VISTA WAY

SUN CITY CENTER, FL 33573 US #1606

CLEARWATER BEACH, FL 33767 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: 02/05/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

ESTADT, BARRY K ESTADT, BARRY K Name: Name: 1200 GULF BLVD #1606 529 RIMINI VISTA WAY Address: Address: City-St-Zip: CLEARWATER, FL 33767 City-St-Zip: SUN CITY CENTER, FL 33573

Title: MRS. () Delete Title: MRS. (X) Change () Addition

Name: ESTADT, JEAN M Name: ESTADT, JEAN M 1200 GULF BLVD #1606 Address: 529 RIMINI VISTA WAY Address: CLEARWATER, FL 33767 SUN CITY CENTER, FL 33573 City-St-Zip: City-St-Zip:

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.

SIGNATURE: BARRY K. ESTADT DR. 02/05/2007