2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000046802

Entity Name: ECI CONSTRUCTIONS, INC.

FILED Sep 29, 2005 Secretary of State

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Current P	rincipal Place	of Business:	New Prin	New Principal Place of Business:	
6930 COLLINS AVE STE 184 MIAMI BEACH, FL 33141				1953 NW 22ND ST MIAMI, FL 33142	
Current M	lailing Addres	s:	New Mail	New Mailing Address:	
6930 COLLINS AVE STE 184 MIAMI BEACH, FL 33141			246	18520 NW 67AV 246 MIAMI, FL 33015	
FEI Number:	: 20-0884686	FEI Number Applied For ()	El Number Not App	olicable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	d Address of New Registered Agent:	
CONSULT 2588 SW 2 MIAMI, FL	27 AVE	S OF SOUTH FLORIDA, INC.			
	named entity s e of Florida.	ubmits this statement for the purp	oose of changing	its registered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Agent		Date	
	S AND DIREC			NS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () REANO, ANA M 1952 NW 22 ST MIAMI, FL 3314		Title: Name: Address: City-St-Zip:	PD (X) Change () Addition ACOSTA, GUILLERNO PRESIDE 1953 NW 22 ST MIAMI, FL 33142	
Title: Name: Address: City-St-Zip:	VP-S () SALAS, FELIX 1953 NW 22ND MIAMI, FL 3314		Title: Name: Address: City-St-Zip:	VP-S (X) Change () Addition REANO, ANA M VP-SECR 1953 NW 22ND ST MIAMI, FL 33142	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition SALAS, FELIX DIR 18520 NW 67 AVE SUIT 246 MIAMI, FL 33015	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition VACANT, NA DIR NA NA, FL 33142	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition VACANT, NA DIR NA NA, FL 33142	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition VACANT, NA DIR NA NA, FL 33142	

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: FELIX SALAS D 09/29/2005