2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000056224

Entity Name: ALL ASPECT RENOVATIONS, INC.

FILED Feb 09, 2006 Secretary of State

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

4570 SADDLE CREEK RUN
NEW SMYRNA BEACH, FL 32168
4750 SADDLE CREEK RUN
NEW SMYRNA BEACH, FL 32168
NEW SMYRNA BEACH, FL 32168

Current Mailing Address: New Mailing Address:

P.O. BOX 291001 PORT ORANGE, FL 32129

FEI Number: 75-3156926 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:

ROUSSEY, TODD A1A REGISTERED AGENT INC.
P.O. BOX 291001 92 SADBERRY ROAD
PORT ORANGE, FL 32129 US QUINCY, FL 32351 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: PAUL SMITH V.P 02/09/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 ROUSSEY, TODD
 Name:
 ROUSSEY, TODD

 Address:
 P.O. BOX 291001
 Address:
 P.O. BOX 291001

City-St-Zip: PORT ORANGE, FL 32129 City-St-Zip: PORT ORANGE, FL 32129

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

Name: BLAIR, EDGAR Name: BLAIR, EDGAR
Address: 330 WILD ORANGE DRIVE Address: 4750 SADDLE CREEK RUN

Address: 330 WILD ORANGE DRIVE Address: 4750 SADDLE CREEK RUN
City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: TODD ROUSSEY DP 02/09/2006