2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000095038

E-CENTRIC, INC.



Principal Place of Business

6159 WATERFIELD WAY SAINT CLOUD, FL 34771 Mailing Address

6159 WATERFIELD WAY SAINT CLOUD, FL 34771

FILED Apr 10, 2006 8:00 am Secretary of State

04-10-2006 90312 033 ***150.00

60024954

CR2E034 (11/05)



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Applied For 4. FEI Number 20-1375933 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

01222006

Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, PA. 1840 SW 22ND ST. 47H PLOOR MIAMI, FL 33145

Edward J. Goldberg 6159 Waterfield Way Saint Cloud, FL 34771

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No Chg-P

8.	The above named entity submits this statement for the purpose of cha	anging its registered office or registered agent, or both	n, in the State of Florida.	I am familiar with, and accept
	the obligations of registered agent.			
Sli	GNATURE Sprace to profiled rythe or regulared agent and title if yelphotobie.		4/2/06	5
	Signatore, typed or printed name of regulared agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)		DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 8. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. PSD BILLE NAME AVALON, MICHAEL J 6159 WATERFIELD WAY STREET ADDRESS CITY-ST-ZIP SAINT CLOUD, FL 34771 VTD TITLE , , GOLDŠERĠ, EDWARD J NAME 6159 WATERFIELD WAY STREET ADDRESS CITY-ST-7IP SAINT CLOUD, FL 34771 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZP TITA.F NAME STREET ADDRESS CITY-ST-ZIP TIRE NAME STREET ADDRESS

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 all other like empowered.

CHY-ST-ZIP

Edward J. Goldbug V.P.

407-762-2158