

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158769

**FILED**  
**Feb 08, 2006**  
**Secretary of State**

**Entity Name:** AMERICA DRY SYSTEM & RESTORATION, INC.

**Current Principal Place of Business:**

11246 N.W. 46TH DRIVE  
CORAL SPRINGS, FL 33076

**New Principal Place of Business:**

5548 NORTH PARK ROAD  
FT. LAUDERDALE, FL 33312

**Current Mailing Address:**

11246 N.W. 46TH DRIVE  
CORAL SPRINGS, FL 33076

**New Mailing Address:**

5548 NORTH PARK ROAD  
FT. LAUDERDALE, FL 33312

**FEI Number:** 20-2004197

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AVROYA, EREZ  
11246 N.W. 46TH DRIVE  
CORAL SPRINGS, FL 33076 US

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

AVROYA, EREZ  
5548 NORTH PARK ROAD  
FT. LAUDERDALE, FL 33312 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:**

02/08/2006

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: AVROYA, EREZ  
Address: 11246 N.W. 46TH DRIVE  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: AVROYA, EREZ  
Address: 5548 NORTH PARK ROAD  
City-St-Zip: FT. LAUDERDALE, FL 33312

Title: VP ( ) Change (X) Addition  
Name: AVROYA, OREN  
Address: 5548 NORTH PARK ROAD  
City-St-Zip: FT. LAUDERDALE, FL 33312

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:** AVROYA OREN

VP

02/08/2006

Electronic Signature of Signing Officer or Director

Date