

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000056363

FILED
Mar 08, 2006
Secretary of State

Entity Name: EXECUTIVE ADJUSTING SERVICES, INC.

Current Principal Place of Business:

12228 SW 10TH STREET
PEMBROKE PINES, FL 33025

New Principal Place of Business:

8443 W MISSIONWOOD DRIVE
MIRAMAR, FL 33025

Current Mailing Address:

12228 SW 10TH STREET
PEMBROKE PINES, FL 33025

New Mailing Address:

8443 W MISSIONWOOD DRIVE
MIRAMAR, FL 33025

FEI Number: 76-0789030

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILCOTT, AUDIE
12228 SW 10TH STREET
PEMBROKE PINES, FL 33025 US

Name and Address of New Registered Agent:

SILCOTT, AUDIE C
8443 W MISSIONWOOD DRIVE
MIRAMAR, FL 33025 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: AUDIE SILCOTT

03/08/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SILCOTT, AUDIE C
Address: 12228 SW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025

Title: VP (X) Delete
Name: SILCOTT, ELVIS M
Address: 12228 SW 10TH STREET
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SILCOTT, AUDIE C
Address: 8443 W MISSIONWOOD DRIVE
City-St-Zip: MIRAMAR, FL 33025

Title: () Change () Addition
Name:
Address:
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: AUDIE SILCOTT

P

03/08/2006

Electronic Signature of Signing Officer or Director

Date