

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000105948

FILED
Jul 21, 2006
Secretary of State**Entity Name:** AN EARTH SOLUTIONS COMPANY--KING MANAGEMENT GROUP, INC.**Current Principal Place of Business:**7700 CONGRESS AVENUE
SUITE 1128
BOCA RATON, FL 33487**New Principal Place of Business:****Current Mailing Address:**7700 CONGRESS AVENUE
SUITE 1128
BOCA RATON, FL 33487**New Mailing Address:****FEI Number:** 20-0378589**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SHENDALE, IAN
7700 CONGRESS AVENUE
SUITE 1128
BOCA RATON, FL 33487 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date**OFFICERS AND DIRECTORS:****Title:** D () Delete
Name: SHENDALE, IAN
Address: 7700 CONGRESS AVENUE
City-St-Zip: BOCA RATON, FL 33487**Title:** P (X) Delete
Name: LEVIN, ALAN
Address: 7700 CONGRESS AVENUE
City-St-Zip: BOCA RATON, FL 33487**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** P (X) Change () Addition
Name: SHENDALE, IAN
Address: 7700 CONGRESS AVENUE
City-St-Zip: BOCA RATON, FL 33487**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: IAN SHENDALE

P

07/21/2006

Electronic Signature of Signing Officer or Director_____
Date