2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000126574

Entity Name: RESURRECT RE-CONSTRUCTION ENTERPRISES INC.

FILED Jun 12, 2006 Secretary of State

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

4802 E HILLSBOROUGH AVE 3614 EAST ELLICOTT STREET

TAMPA, FL 33610 TAMPA, FL 33610

Current Mailing Address: New Mailing Address:

2780 E FOWLER AVE POB 8594

#178 TAMPA, FL 33674 TAMPA, FL 33612

FEI Number: 06-1756020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

THOMAS, SHANA

2780 E FOWLER AVE
#178

TAMPA, FL 33612 US

GOSA-STOKES, TAMEKIA
3614 EAST ELLICOTT STREET
TAMPA, FL 33610 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: TAMEKIA STOKES-GOSA 06/12/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: THOMAS, SHANA Name: THOMPSON, DERRIC E

 Name:
 THOMAS, SHANA
 Name:
 THOMPSON, DERRIC E

 Address:
 2780 E FOWLER AVE #178
 Address:
 5607 HUGHES COURT

 City-St-Zip:
 TAMPA, FL 33617
 City-St-Zip:
 TAMPA, FL 33619

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 THOMAS, DERRIC
 Name:
 HARRIS, LORRAINE Y

 Address:
 4802 E HILLSBOROUGH AVE
 Address:
 POB 8594

 City-St-Zip:
 TAMPA, FL 33610
 City-St-Zip:
 TAMPA, FL 33674

Title: O () Delete Title: SEC (X) Change () Addition

 Name:
 JONES, LORETTA
 Name:
 THOMPSON, ELENAOR

 Address:
 2126 W PINE ST
 Address:
 5607 HUGHES COURT

 City-St-Zip:
 TAMPA, FL 33607
 City-St-Zip:
 TAMPA, FL 33619

Title: SEC (X) Delete Title: () Change () Addition

 Name:
 WILLIAMS, MAZIE
 Name:

 Address:
 1601 E 29TH AVE
 Address:

 City-St-Zip:
 TAMPA, FL 33605
 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: DERRIC E. THOMPSON PRES 06/12/2006