

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000126574

FILED
Jun 23, 2006
Secretary of State

Entity Name: RESURRECT RE-CONSTRUCTION ENTERPRISES INC.

Current Principal Place of Business:

3614 EAST ELLICOTT STREET
TAMPA, FL 33610

New Principal Place of Business:

1601 E. 29TH AVE
TAMPA, FL 33605

Current Mailing Address:

POB 8594
TAMPA, FL 33674

New Mailing Address:

2780 E FOWLER AVE #178
TAMPA, FL 33612

FEI Number: 06-1756020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOSA-STOKES, TAMEKIA
3614 EAST ELLICOTT STREET
TAMPA, FL 33610 US

Name and Address of New Registered Agent:

THOMAS, SHANA D
2780 E FOWLER AVE #178
TAMPA, FL 33612 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: SHANA THOMAS

06/23/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMPSON, DERRIC E
Address: 5607 HUGHES COURT
City-St-Zip: TAMPA, FL 33619

Title: VP (X) Delete
Name: HARRIS, LORRAINE Y
Address: POB 8594
City-St-Zip: TAMPA, FL 33674

Title: SEC (X) Delete
Name: THOMPSON, ELENAOR
Address: 5607 HUGHES COURT
City-St-Zip: TAMPA, FL 33619

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: THOMAS, SHANA D
Address: 2780 E FOWLER AVE #178
City-St-Zip: TAMPA, FL 33612

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHANA THOMAS

P

06/23/2006

Electronic Signature of Signing Officer or Director

Date