

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128824

FILED
Jul 10, 2006
Secretary of State

Entity Name: ER TECH INVESTMENTS INC.

Current Principal Place of Business:

631 NORTH US1
SUITE 612
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

7845 155TH PLACE NORTH
PALM BEACH GARDENS, FL 33418

New Mailing Address:

FEI Number: 20-3666174 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RALPH, TIMOTHY
2266 BIMINI DRIVE
WEST PALM BEACH, FL 33406 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: EHR, NICHOLAS M
Address: 7845 155TH PLACE NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VP () Delete
Name: RALPH, TIMOTHY K
Address: 2266 BIMINI DRIVE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: SEC () Delete
Name: EHR, NICHOLAS M
Address: 7845 155TH PLACE NORTH
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: TREA () Delete
Name: RALPH, TIMOTHY K
Address: 2266 BIMINI DRIVE
City-St-Zip: WEST PALM GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: NICHOLAS EHR

PRES

07/10/2006

Electronic Signature of Signing Officer or Director

Date