

2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000002444

Entity Name: ECR GENERAL SERVICES INC

FILED
Sep 29, 2009
Secretary of State

Current Principal Place of Business:

3309 ORINOCO LN
MARGATE, FL 33063

New Principal Place of Business:

3590 BLUE LAKE DR
#102
POMPANO BEACH, FL 33064

Current Mailing Address:

3309 ORINOCO LN
MARGATE, FL 33063

New Mailing Address:

3590 BLUE LAKE DR
#102
POMPANO BEACH, FL 33064

FEI Number: 26-1724288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DINIZ, CHIRLON L
3309 ORINOCO LN
MARGATE, FL 33063 US

Name and Address of New Registered Agent:

DINIZ, CHIRLON L
3590 BLUE LAKE DR
#102
POMPANO BEACH, FL 33064 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: CHIRLON L DINIZ

09/29/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DINIZ, CHIRLON L
Address: 3309 ORINOCO LN
City-St-Zip: MARGATE, FL 33063

Title: VP (X) Delete
Name: DUNZER, EDNEI F
Address: 2850 NE 7TH TERR
City-St-Zip: POMPANO BEACH, FL 33064

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DINIZ, CHIRLON L
Address: 3590 BLUE LAKE DR # 102
City-St-Zip: POMPANO BEACH, FL 33064

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

I hereby certify that the information supplied with this filing does not qualify 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: CHIRLON L DINIZ

PRES

09/29/2009

Electronic Signature of Signing Officer or Director

Date