2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29490

Entity Name: EASTERN TECHNOLOGIES, INC.

FILED Feb 17, 2006 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:			
215 SECON PO BOX 40 ASHFORD,	ND AVE 9	or Busilless.	New Fille	pai Flace of Busiliess.	
Current Mailing Address:			New Mailing Address:		
215 SECON PO BOX 40 ASHFORD,					
FEI Number:	63-0954738	FEI Number Applied For ()	FEI Number Not Appli	cable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331 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.					
SIGNATUR		- Oi		Data	
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: AI				S/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:		Delete LARUE, JUE	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	VTD () FELLOWS, MAR 7511 E US 84 ASHFORD, AL 3		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () MCWATERS, AN 110 FIRST AVEN ASHFORD, AL 3	IUE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PD () STEWARD, JOH 204 DEVONSHIF MCKINNEY, TX	N B RE COURT	Title: Name: Address: City-St-Zip:	()Change()Addition	
Title: Name: Address: City-St-Zip:	VD () JOHNSTON, JOH 14284 W CORA GOODYEAR, AZ	LANE	Title: Name: Address: City-St-Zip:	D (X) Change () Addition JOHNSTON, JORDAN M 14284 W CORA LANE GOODYEAR, AZ 85338	
Title: Name: Address: City-St-Zip:	NOEL, CURT	Delete D PARKWAY, SUITE 128 0338	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: MARK S. FELLOWS VP 02/17/2006