

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000020126

FILED
Jun 21, 2005
Secretary of State

Entity Name: TOTAL RESTORATION SERVICES, INC.

Current Principal Place of Business:

5620 NW 12TH AVENUE
SUITE 103
FT. LAUDERDALE, FL 33309

Current Mailing Address:

5620 NW 12TH AVENUE
SUITE 103
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

1925 S. PERIMETER ROAD
SUITE 110
FT. LAUDERDALE, FL 33309

New Mailing Address:

1925 S. PERIMETER ROAD
SUITE 110
FT. LAUDERDALE, FL 33309

FEI Number: 65-0856712

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOENIG, JOHN
5620 NW 12TH AVE.
STE 103
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

KOENIG, JOHN
1925 S. PERIMETER ROAD
SUITE 110
FT. LAUDERDALE, FL 33309 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:

06/21/2005

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: D () Delete
Name: KOENIG, JOHN
Address: 5620 NW 12TH AVENUE STE 103
City-St-Zip: FT. LAUDERDALE, FL 33309

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: KOENIG, JOHN
Address: 1925 S. PERIMETER ROAD, SUITE 110
City-St-Zip: FT. LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN KOENIG

D,P

06/21/2005

Electronic Signature of Signing Officer or Director

Date