## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000064633

Entity Name: MULTI-RESOURCES INC.

FILED Apr 14, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
10300 49TH STREET CLEARWATER, FL 33762						
Current Mailing Address:			New Mailir	New Mailing Address:		
10300 49TH STREET CLEARWATER, FL 33762						
FEI Number:	59-3309428	FEI Number Applied For ( )	FEI Number Not Appli	icable ( )	Certificate of Status Desired ( )	
Name and	Address of (	Current Registered Agent:	Name and	Address of	f New Registered Agent:	
DATEX INTERNATIONAL INC 10300 49TH STREET CLEARWATER, FL 33762 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:						
		nic Signature of Registered Age	nt		Date	
Election Campaign Financing Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CCEO ( ARMANIOUS, S 10300 49TH S' CLEARWATER	Т	Title: Name: Address: City-St-Zip:		()Change ()Addition	
Title: Name: Address: City-St-Zip:	ARMANIOUS, I 10300 49TH S		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ARMANIOUS, A 10300 49TH S		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
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Title: Name: Address: City-St-Zip:	ARMANIOUS, I 10300 49TH S		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BEALE, CHAR 10300 49TH S		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: MARIE ARMANIOUS TREA 04/14/2006