


2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # S95826		
1. Entity Name BUILDING RESTORATION SYSTEMS, INC.		

FILED

07 JUN 13 PM 3:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA




Principal Place of Business 406 RACE TRACK ROAD NORTH OLDSMAR, FL 34677 US	Mailing Address 406 RACE TRACK ROAD NORTH OLDSMAR, FL 34677 US
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2. Principal Place of Business - No P.O. Box # 9400 River Crossing Blvd.	3. Mailing Address 9400 River Crossing Blvd.
Suite, Apt. #, etc. Suite 102	Suite, Apt. #, etc. Suite 102

06082007 Chg-P CR2E034 (12/06)

City & State New Port Richey, FL	City & State New Port Richey, FL
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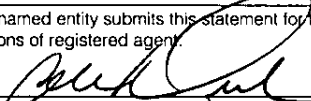
4. FEI Number 59-3105912	Applied For Not Applicable
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Zip 34655	Country Pasco	Zip 34655	Country Pasco
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5. Certificate of Status Desired XX	\$8.75 Additional Fee Required
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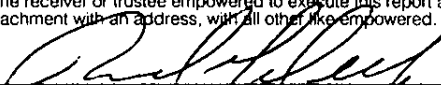
6. Name and Address of Current Registered Agent TORRENCE, ALFRED 6645 RIDGE RD PORT RICHEY, FL 34668	
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7. Name and Address of New Registered Agent Name Alex R. Deeb Street Address (P.O. Box Number is Not Acceptable) 9400 River Crossing Blvd., Suite 102 City New Port Richey FL Zip Code 34655	
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE 	DATE June 11, 2007
(NOTE: Registered Agent signature required when reinstating)	

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000104674620 06/21/07--01048--019 **70.00
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RESMONDO, GARY W 406 RACETRACK RD N OLDSMAR, FL 34677 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/P Richard G. Deeb 9400 River Crossing Blvd., Suite 102 New Port Richey, FL 34655 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Mariena D. Gribble 9400 River Crossing Blvd., Suite 102 New Port Richey, FL 34655 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S Stephanie D. Dieters 9400 River Crossing Blvd., Suite 102 New Port Richey, FL 34655 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T Adam R. Deeb 9400 River Crossing Blvd., Suite 102 New Port Richey, FL 34655 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Richard J. Deeb, II 9400 River Crossing Blvd., Suite 102 New Port Richey, FL 34655 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Thomas P. Deeb 9400 River Crossing Blvd., Suite 102 New Port Richey, FL 34655 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	
SIGNATURE: 	DATE June 11, 2007
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Richard G. Deeb, President	