2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004562

Entity Name: EAGLE CREST ENTERPRISES, INC.

FILED May 30, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

3183 N.E. APPALOOSA ST. ARCADIA, FL 34266

Current Mailing Address: New Mailing Address:

P.O. BOX 3890 3183 N E APPALOOSA ST SEMINOLE, FL 33775 ARCADIA, FL 34266

FEI Number: 41-1717180 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DRINKUT, MARION 3183 N.E. APPALOOSA ST. ARCADIA, FL 34266 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:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP () Delete Title: CP (X) Change () Addition Name: DRINKUT, MARION Name: DRINKUT, MARION

 Name:
 DRINKUT, MARION
 Name:
 DRINKUT, MARION

 Address:
 P.O. BOX 3890
 Address:
 3183 N E APPALOOSA ST

 City-St-Zip:
 SEMINOLE, FL 33775
 City-St-Zip:
 ARCADIA, FL 34266

Title: DS () Delete Title: () Change () Addition

 Name:
 DRINKUT, PAULA
 Name:

 Address:
 1541 BRICKELL AVE., #2106
 Address:

 City-St-Zip:
 MIAMI, FL 33129
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

Name: DRINKUT, JEAN Name: DRINKUT, JEAN

 Address:
 134 GORDON DR.
 Address:
 3183 N E APPALOOSA ST

 City-St-Zip:
 SEMINOLE, FL 33772
 City-St-Zip:
 ARCADIA, FL 34266

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: MARION DRINKUT PRES 05/30/2007