

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000038590

FILED
Mar 15, 2006
Secretary of State

Entity Name: P & R HOME INVESTORS, INC.

Current Principal Place of Business:

9035 HOGANS BEND
TAMPA, FL 336472425

New Principal Place of Business:

Current Mailing Address:

9035 HOGANS BEND
TAMPA, FL 336472425

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMERA, ROBERT
9035 HOGANS BEND
TAMPA, FL 336472425 US

Name and Address of New Registered Agent:

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:

Title: D () Delete
Name: PINO, JOSEPH
Address: 31402 SHAKER CIR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D () Delete
Name: PINO, MARINA
Address: 31402 SHAKER CIR
City-St-Zip: WESLEY CHAPEL, FL 33543

Title: D () Delete
Name: ROMERA, ROBERT
Address: 9035 HOGANS BEND
City-St-Zip: TAMPA, FL 336472425

Title: D () Delete
Name: ROMERA, LORRAINE
Address: 9035 HOGANS BEND
City-St-Zip: TAMPA, FL 336472425

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

Title: () Change () Addition
Name: _____
Address: _____
City-St-Zip: _____

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: JOSEPH PINO

VP

03/15/2006

Electronic Signature of Signing Officer or Director

_____ Date