

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 19, 2007
Secretary of State**

DOCUMENT# P06000131208

Entity Name: SCARLETT HOME IMPROVEMENT, INC.

Current Principal Place of Business:

8282 OLSTER DR
NORTH PORT, FL 34286

New Principal Place of Business:

Current Mailing Address:

8282 OLSTER DR
NORTH PORT, FL 34286

New Mailing Address:

FEI Number: 32-0185015 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SINKLE, MICHELE L
8282 OLSTER DR
NORTH PORT, FL 34286 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SINKIE, MICHELE L
Address: 8282 OLSTER DR
City-St-Zip: NORTH PORT, FL 34286

Title: V () Delete
Name: LABARERA, RICHARD C
Address: 8282 OLSTER DR
City-St-Zip: NORTH PORT, FL 34286

Title: ST () Delete
Name: LABARBERA-SINKLE, MICHELE
Address: 8282 OLSTER DR
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SINKLE, MICHELE L
Address: 8282 OLSTER DR
City-St-Zip: NORTH PORT, FL 34286

Title: VP (X) Change () Addition
Name: LABARBERA, RICHARD C
Address: 8282 OLSTER DR
City-St-Zip: NORTH PORT, FL 34286

Title: TRE (X) Change () Addition
Name: SINKLE, STEPHEN T
Address: 8282 OLSTER DR
City-St-Zip: NORTH PORT, FL 34286

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: MICHELE L SINKLE

P

07/19/2007

Electronic Signature of Signing Officer or Director

Date