## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P96000049911 (6)

U.S. HOME INSPECTION TEAM, INC.

Principal Place of Business	Mailing Address	
3760 N.W. 116TH TERRACE SUNRISE FL 33323	3760 N.W. 116TH TERRACE SUNRISE FL 33323	
		3. Date Incorpor 06/10/1990
2. Principal Place of Business	2a. Mailing Address	4. FEI Number
21	26	65-06756
Suite, Apt. #, etc.	Suite, Apt #, etc.	5. Certificate of S

## **FILED** May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				T THE DESIGNATION AND STATE REPORT METERS DESIGNATION OF THE PROPERTY OF THE P	1919 1919 1919E 1889A 1141 (991			
3760 N.W. 116TH TERRACE 3760 N.W. 116TH TERRACE SUNRISE FL 33323 SUNRISE FL 33323			DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualified 06/10/1996		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Applied For	
21		26				65-0675600	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt #, etc.					\$8.75 Additional	
22		27				5. Certificate of Status Desired	Fee Required	
City & State	e	City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip				This corporation owes or has paid the current year Intaggible		
24	25	29			Personal Property Tax due June 30. Yes			
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Registers	d Agent	
DO	rsky, eric esq.			B1 N	ame			
	10 <b>6.</b> W. 64TH AVENUE		<u> </u>	<b>B2</b> S	treet Addre	ss (P.O. Box Number is Not Acceptable)		
DA	VIE FL 33314			B3	<del></del>			
				<b>84</b> C	ity	F	65 Zip Code	
11. Pursuant to office or re	to the provisions of Sections 607.00 egistered agent, or both, in the Stal m familiar with, and accept the obli	02 and 607.1508, Florida Statute of Florida, Such change was gations of Section 607.0505. Fl	es, the ab authorized	ove-na by the	med corpo corporatio	oration submits this statement for the purpose on's board of directors. I hereby accept the a	of changing its registered ppointment as registered	
SIGNATURE	The state of the s	ganorio di, eccitori 607.6000, 17	onda olak	105.				
OIGINATORE	Signature, typied or printed harrie of registered a	gent and tale if applicable (NOT	t Rogistered	Agent s	jnature required	d when reinstaling) DATE		
12.		VD DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	0	☐ DELETE	1.1 7(1)	.E			Change Addition	
NAME	PRESUTTI, BILL		1.2 NAI	ΛE				
STREET ADDRESS	\$760 N.W. 116TH TERRACE			EET ADD				
CITY-ST-ZIP	SUNRISE FL 33323	DELETE		/ - ST - ZII	·			
TITLE		□ DECEIE	2.1 7(1)				☐ Change ☐ Addition	
NAME CAREET ADDRESS			2.2 NAI		2505			
STREET ADDRESS				EE1 ADD	- 1			
CITY-ST-ZIP TITLE		DELETE	2. 4 GIT	Y-ST-ZI F	<u> </u>		Change Addition	
NAME			3.2 NAI				Change Addition	
STREET ADDRESS				EET ADD	9500			
CITY-ST-ZIP				Y-ST-ZI	1			
TITLE		☐ DELETE	4 1 TH				Change Addition	
NAME			4. 2 NA	ΜE	}			
STREET ADDRESS			4.3 STR	EET ADD	RESS			
CITY-ST-ZIP				'- ST - ZIA				
TITLE		DELETE	5.1 TITL	E			Change Addition	
NAME			5.2 NAM	1E				
STREET ADDRESS			5 3 STR	IDDA 133	RESS			
CITY-ST-ZIP			5.4 C(T)	'- ST- ZIF	<u>,                                     </u>			
TITLE		DELETE	6.1 TITE				Change Addition	
NAME			6.2 NAM	<b>NE</b>				
STREET ADDRESS			6.3 STR	EE1 ADDI	₹ESS			
CITY-ST-ZIP			6.4 CIT	'- ST- ZIF	,			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is toge and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee employeered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or ony an attachment with an affolioss.