

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000037675

Entity Name: DREAMS HOME IMPROVEMENT INC.

Current Principal Place of Business:

601 SE STREAMLET AVE
PORT SAINT LUCIE, FL 34983

Current Mailing Address:

601 SE STREAMLET AVE
PORT SAINT LUCIE, FL 34983

FEI Number: 20-8655013

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARDOSO, SALOMAO S
601 SE STREAMLET AVE
PORT SAINT LUCIE, FL 34983 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

Officer/Director Detail :

Title P
Name CARDOSO, SALOMAO S
Address 601 SE STREAMLET AVE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title VP
Name CARDOSO, SAMUEL S
Address 601 SE STREAMLET AVE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title SECRETARY
Name LOZANO, JUAN
Address 601 SE STREAMLET AVE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title TREASURER
Name LOZANO, JUAN J
Address 601 SE STREAMLET AVE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title ASST. SECRETARY
Name TORRES, IVAN
Address 601 SE STREAMLET AVE
City-State-Zip: PORT SAINT LUCIE FL 34983

Title ASST. TREASURER
Name GARCIA, LUCIANO
Address 601 SE STREAMLET AVE
City-State-Zip: PORT SAINT LUCIE FL 34983

I hereby 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 all other like empowered.

SIGNATURE: SALOMAO CARDOSO

PRESIDENT

04/24/2014

Electronic Signature of Signing Officer/Director Detail

Date