

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000011804

**Entity Name:** ALL IN ONE HOME IMPROVEMENTS OF CENTRAL FLORIDA, INC.

**FILED**  
**Feb 09, 2015**  
**Secretary of State**  
**CC2679613918**

**Current Principal Place of Business:**

890 NORTHERN WAY  
SUITE F2  
WINTER SPRINGS, FL 32708

**Current Mailing Address:**

890 NORTHERN WAY  
SUITE F2  
WINTER SPRINGS, FL 32708 US

**FEI Number: 36-4649195**

**Certificate of Status Desired: No**

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

GONGAGE, CARLO  
1145 PHEASANT CIR.  
WINTER SPRINGS, FL 32708 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            PRES  
Name            GONGAGE, CARLO PRES  
Address        1145 PHEASANT CIRCLE  
City-State-Zip: WINTER SPRINGS FL 32708

*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: CARLO GONGAGE**

**PRESIDENT**

**02/09/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date