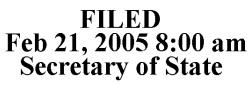
2005 FOR PROFIT CORPORATION

ANNUAL REPORT DOOL INJENIT # E02000002261



1. Entity Name NORWEST HOME IMPROVEMENT, INC.					02-2	1-2005 90074	029 ***15	0.00
Principal Place of Business 1200 CONCORD AVENUE 3RD FLOOR SOUTH CONCORD, CA 94520 US		Mailing Address 2200 JOHN GLEN DRIVE MAC A0303-139 CONCORD, CA 94520 US				13567 1368 1388	0	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			02022005 Chg-	P CR2E	E034 (10/03) .	
City & State		City & State			4. FEI Number 76-0256232		· · · · ·	plied For t Applicable
Zip Country Zip			Country		5. Certificate of Status D		\$8.75 Add - Fee Required	
6. Name and Address of Current Registered Agent					7. Name and Address	of New Registered	1 Agent	
CORPORATION SERVICE COMPANY			Name	Street Address (P.O. Box Number is Not Acceptable)				
1201 HAYS STREET TALLAHASSEE, FL 32301				Construction (i.e. sex named is not recognised)				
			City				L Zip Code	9
8. 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. I am familiar with, and accept the obligations of registered agent.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOWILL FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees \$\square\$2 in \$150.00 May Be Added to Fees								
	OFFICERS AND I	L DIRECTORS	11.		ADDITIONS/CHANGES	TO OFFICERS AN	ND DIRECTORS	5 IN 11
TITLE	PD	☐ Delete	TITLE			4	☐ Change	☐ Addition
NAME	WOO HO, DOREEN		NAME			•		
STREET ADDRESS	550 CALIFORNIA 9TH FLOOR		STREET ADDRESS	·		1		
CITY-ST-ZIP	SAN FRANCISCO, CA 94194		CITY-\$T-ZIP	_				
TITLE	SVPD	☐ Delete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS	TOLDA, THOMAS 550 CALIFORNIA 9TH FLOOR		NAME STREET ADDRES	,				
CITY-ST-ZIP	SAN FRANCISCO, CA 94194		CITY-ST-ZIP	´				
TITLE	SVPS	Delete	TITLE	SVP	·5		☐ Change	Addition
NAME	AGUIRRE, ANNETTE		NAME	I		1111 =1.		<i>-</i> /^-~
STREET ADDRESS	2200 JOHN GLEN DR	•	STREET ADDRES	; <u>5</u> 50	California St.,	al dor		
CITY-ST-ZIP	CONCORD, CA 94520		CITY-ST-ZIP	29v	Francisco, CA	<u>, 44104 </u>		
TITLE	VP DIAMOND, KATHRYN	Delete	TITLE NAME				Change	☐ Addition
NAME STREET ADDRESS	550 CALIFORNIA 9TH FLOOR	,	STREET ADDRES	3				
CITY-ST-ZIP	SAN FRANCISCO, CA 94194		CITY-ST-ZIP	-				
TITLE	VPC	☐ Delete	TITLE				☐ Change	Addition
NAME	LEE, JANET		NAME			•		
STREET ADDRESS CITY-ST-ZIP	550 CALIFORNIA 9TH FLOOR 550 SAN FRANCISCO, CA 94194	2.1026	STREET ADDRES	- 1	TVY, TORTON TA	ID AUGUST	1.7660,74	
TITLE	er grang grand er er er ber ber gestelligt.	12 Déleté Cours.		_	einte e	<u> </u>	☐ Change	Addition
NAME 1	The Permission of the Control of the	S elected Condens	Duriaman'	d fe	CO 451E7		வளமு	_ radition
STREET ADDRESS	The second section of the second seco		STREET ADDRES			T		
CITY-ST-ZIP	and the same of th	Alta Ellin alan and a see a see	CITY-ST-ZIP		(9. , 110.07/DV/) Flat 1	,25 _{1.2}		
12. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this cond or supplemental conditions and securate and that my signature shall have the same legal affect as if made under early that I am an affect or dispeter.								

indicated on this report or supplemental report is true and accurate apet hat my 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 truttee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with appears, with all high life empoyered.