DOCUMENT # L04000031180

FILED Apr 19, 2005 8:00 am Secretary of State 02-03-2005 90114 036 ****55.00

1. Entry Name HOME REPAIRS & REMODELING BY RICHARD HARRICK LLC.					
Principal Place of Business Melling Address 435 38TH SQUARE SW. 435 38TH SQUARE SW. VERO BEACH, FL. 32968 VERO BEACH, FL. 32968.				ો) UV JUTA
II. Principal Place of Business 8. Malling Address					
Sufte, Apt. #, etc.		Suite, Apt. 6, etc.		01252005 Chg-LLC	CR2E083 (10/03)
City & State	<u>-</u>	City & State		4. FEI Number	Applied For Not Applicable
Zap	Country	Zip	Country	5. Certificate of Status Desired	\$5.00 Additional Fee Required
	Q. Hame and Addpose of Current	Registered Agent		7. Manu and Address of New Reg	latered Agent
HARRICK,			Narre		
455 38TH SQUARE SW. VERO BEACH, FL 32968				(P.O. Box Number is Not Acceptable)	
	# .		City		FL Zp Code
8. The above representity automits this appropriate the purpose of charreing to registered office or registered agent, or both, in the State of Fronts, I am brailler with, and accept					
SIGNATURE PLAN STONE RICHARD HARRICK 1-25-01					
FII Du	ing Fee is \$50.00 e by May 1, 2003	F .49		4,500.00	Construction (Construction Construction Cons
8.	MANAGING MEMBE		10.	ADDITIONS/C	
TITLE NAME ETREET ADDRESS CITY-ST-29*	HICHARD HARRING S 435-36th Gas Vero Be FROM	CL pl	TITLE 1934E 5TREET ADDRESS CITY-ST-ZP	•	Change Addition
TTULE NAME STREET ADDRESS CITY-SI-289		32467 12 mass	TITLE NUME STREET ACCRESS CITY-ST-2P		☐ Change ☐ Addition
TITLE WANTE STREET MODRESS OTTY-65-20	 -	□ Odea	TITLE NAME STREET ADDRESS CITY-ST-2P	· · · · · ·	☐ Change ☐ Addition
TITLE 1945E STREET ADDRESS CITY-ST-ZP		□ Deleta	TITLE NAME STREET ADDRESS : CITY-ST-ZP		Change Addition
NAME STREET ADDRESS CITY-ST-70		Control Control	NAME STREET ADDRESS CATY-SI-ZP	ر میناند است. در این	☐ Charque ☐ Addition
TRE	en physical shappe will be no section and	☐ Cetto	TILE FILE FILE STRET AUDRESS CITY-ST-ZP	Here to a	Change Addition
11. I hereby cartify that the information supplied with this fitting does not qualify for the exemption stated in Section 119.07(3)(ii). Florida Statutes, I further cartify that the information indicated on this report is true and occurate and that my signature shall have the same legal effect as if made under cart; that I am a managing member or manager of the limited liability company or intrinsection trustees and interest in the property of the statutes. 772 - 770 SIGNATURE: CARRO HAROL -27-5 1491					

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000031180 ATTACHMENT 1. Entity Name HOME REPAIRS & REMODELING BY RICHARD HARRICK LLC. Principal Place of Business Mailing Address 435 38TH SQUARE SW. 435 38TH SQUARE SW. VERO BEACH, FL 32968 VERO BEACH, FL 32968 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04072005 CR2E083 (10/03) Chg-LLC City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HARRICK, RICHARD Street Address (P.O. Box Number is Not Acceptable) 435 38TH SQUARE SW. VERO BEACH, FL 32968 City Zip Code FI 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 DATÉ Filing Fee Is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change □ Delete Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-7IP Addition TITLE ☐ Change □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST-ZIP ☐ Change Delete TITLE ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 11. I hereby 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. ATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED RE