200	2 UNII	FORM BUS	INESS RE	PORT (UE	BR)		F	ILED	)	
DOCU 1. Entity Nar	MENT	# N00000	006246	NICAR	d		r 18,	2002 ary of	8:0	
PREPAIR	REPAIR	<del>, INC</del> .						90468 026		
WEL	COME 1	Home OUTR	EACH INC	<u> </u>			o , 10 2002	70,100 020	, 0	,
Principal Pla	ce of Business		Mailing Address							
874-BREVARD			P-O-BOX 623					IIIII DA D		
US US	32822		GOLDENROD FL 3273	3-0623			L	บบบอเจอ	ขอ	
	_		F							
2. Principal I	Place of Busine Smu	BLV0	3. Mailing Address	6677653						
Suite, Apt			Suite, Apt. #, etc.	<u> </u>	•		DO NOT WRIT	TE IN THIS SPA	√CE	
City & Sta	ANDO	Fi	City & State OCLANO	F		4. FEI Number	N-267E 404			oplied For
Zin	817	Country USA	Zip 32867-765	Country		5. Certificate of St	9-3675104 atus Desired		.75 Add	
		and Address of Current	7	3   43/		7. Name and Add	ress of New R	- / ret	Require	ed
				Name	LING	,	BARIO			
D'ERRICO	RUDOLD		· • • • • • • • • • • • • • • • • • • •	Street	Address (F	P.O. Box Number is I	Vot Acceptable	<del>)</del>		
87 <del>4 BREV</del>	ARD-CT			-	<u> ゆるつ</u>	sma b	LVD.			
ORLANDO	FL 32822	-		City	ORLA	4100		FL	Zip Cod	e_
			<del>-</del>						Zip Cod	817
8. The above	named entity	submits this statement for	r the nurnose of changin	a its registered office	or registers	ad agent or both in	the ctate of Fig	rido		
8. The above	e named entity	submits this statement fo	r the purpose of changin		-	_		rida.		
	e named entity	submits this statement for	r the purpose of changin		-	ed agent, or both, in RIBARI		rida. 4-8-0	٥2	ļ
8. The above	Sy	submits this statement for the	Divi		4 A.	RIBARI		_	2	<del></del>
SIGNATURE	Signature, typed or	printed name of registered agent	During and title if applicable.	LINDA (NOTE: Registered Agent sig	A.	RIBARI when reinstating)	د	4-8-0		
SIGNATURE	Signature, typed or	ila a. (	and title if applicable.  9. Election	LINDA	A.	RIBARI	C Ma	4-8-	ayable	
SIGNATURE	Signature, typed or	printed name of registered agent	and title if applicable.  9. Election Trust Fu	(NOTE: Registered Agent sign Campaign Financing and Contribution.	A A.	When reinstating)  \$5.00 May Be	ک Ma D	DATE  ke Check Popartment of the control of the con	ayable of State	10
SIGNATURE	Signature, typed or	printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF	and title if applicable.  9. Election Trust Fu	(NOTE: Registered Agent sign of Campaign Financing and Contribution.	A. nature required	when reinstating)  \$5.00 May Be Added to Fees	Ma D ES TO OFFICEI	DATE  ke Check Popartment of the control of the con	ayable of State	•
SIGNATURE  10.  TITLE NAME STREET ADDRESS	Signature, typed or FILE NOW: D BUHL, KATH	printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIR	and title if applicable.  9. Election Trust Fu	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11.  11TLE  NAME  STREET ADDRESS	A. Pature required	when reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  4, KATHLE  7, LLERY	Ma D ES TO OFFICE EN A. WAY	DATE  ke Check Popartment of the control of the con	ayable of State	10
SIGNATURE  10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed of Signat	printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF	9. Election Trust Fu	(NOTE: Registered Agent sign of Campaign Financing and Contribution.  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	A. Nature required  A. P. Jones 986 02	when reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE	Ma D ES TO OFFICE EN A. WAY	A-8-Check Prepartment of	ayable of State TORS IN Change	10 ▼Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS	Signature, typed of Signat	printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF	and title if applicable.  9. Election Trust Fu	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	A. nature required  A. nature required  A. nature required	when reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGI  Y, KATHLE  G TILLERY  LLANCO, For S	Ma D ES TO OFFICEI EN A. WAY 32828	DATE  ke Check Prepartment of the Check Properties of	ayable of State	10
SIGNATURE  10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	Signature, typed or  FILE NOW:  D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, [	printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF	9. Election Trust Fu	(NOTE: Registered Agent sign of Campaign Financing and Contribution.  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Joi 98: 08	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE G TILLERY  LANCO, FL S  BARIC S SMU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	DATE  ke Check Prepartment of the Check Properties of	ayable of State TORS IN Change	10 ▼Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or  FILE NOW:  D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS	printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  HLEEN A (WAY EL 32828  DARLENE NY ROAD	9. Election Trust Fu  RECTORS Delete	(NOTE: Registered Agent sign of Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	D Joi 98: 08	when reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  4, KATHLE  7, LLERY	Ma D ES TO OFFICE EN A. WAY RJ828	ke Check Prepartment of the Check Prepartment	ayable of State TORS IN Change	10 PC Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE	Signature, typed or  FILE NOW:  D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D	printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  REEN A WAY L 32828  DARLENE NY ROAD A FL 32459	9. Election Trust Fu	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D Joi 98: 08	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE G TILLERY  LANCO, FL S  BARIC S SMU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	ke Check Prepartment of the Check Prepartment	ayable of State TORS IN Change	10 ▼Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of Signat	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  HLEEN A (WAY FL 32828  DARLENE NY ROAD FA FL 32459	9. Election Trust Fu  RECTORS Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Joe OR D RI 282:	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE G TILLERY  LANCO, FL S  BARIC S SMU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	ke Check Prepartment of the Check Prepartment	ayable of State TORS IN Change	10 PC Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME NAME	Signature, typed or  FILE NOW:  D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	9. Election Trust Fu  RECTORS Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Joe OR D RI 282:	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE G TILLERY  LANCO, FL S  BARIC S SMU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	ke Check Prepartment of the Check Prepartment	ayable of State TORS IN Change	10 PC Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of Santa Ros D D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D D'ERRICO, 874 BREVAF	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	9. Election Trust Fu  RECTORS Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME TITLE NAME TITLE NAME TITLE NAME TITLE	D Joe OR D RI 282:	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE PY  LANCO, FL S  BARIC S  S MU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	A.	ayable of State TORS IN Change	10 PC Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed of Santa Ros D D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D D'ERRICO, 874 BREVAF	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	9. Election Trust Fu  RECTORS Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Joe OR D RI 2822	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE PY  LANCO, FL S  BARIC S  S MU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	A.	ayable of State TORS IN Change Change	Addition  Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	Signature, typed of Santa Ros D D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D D'ERRICO, 874 BREVAF	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	9. Election Trust Fu  RECTORS Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11.  111.  111.  111.  111.  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  NAME  NAME  NAME  NAME  NAME  NAME	D Joe OR D RI 2822	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE PY  LANCO, FL S  BARIC S  S MU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	A.	ayable of State TORS IN Change Change	Addition  Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed of Santa Ros D D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D D'ERRICO, 874 BREVAF	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	9. Election Trust Fu  RECTORS Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11.  111.  111.  111.  111.  111.  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  111.	D Joe OR D RI 2822	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE PY  LANCO, FL S  BARIC S  S MU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	A.	ayable of State TORS IN Change Change	Addition  Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed of Santa Ros D D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D D'ERRICO, 874 BREVAF	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	9. Election Trust Fu  RECTORS  Delete  Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11.  111.  111.  111.  111.  111.  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  NAME	D Joe OR D RI 283.	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE PY  LANCO, FL S  BARIC S  S MU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	A.	ayable of State TORS IN Change Change Change	Addition  Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed of Santa Ros D D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D D'ERRICO, 874 BREVAF	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	9. Election Trust Fu  RECTORS  Delete  Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11.  111.  111.  111.  111.  111.  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  111.	D Joe OR D RI 283.	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE PY  LANCO, FL S  BARIC S  S MU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	A.	ayable of State TORS IN Change Change Change	Addition  Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed of Santa Ros D D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D D'ERRICO, 874 BREVAF	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	9. Election Trust Fu  RECTORS  Delete  Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11.  111.  111.  111.  111.  111.  111.  111.  NAME STREET ADDRESS CITY-ST-ZIP  111.  111.  NAME STREET ADDRESS CITY-ST-ZIP	D Joe OR D RI 283.	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE PY  LANCO, FL S  BARIC S  S MU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	A.	ayable of State TORS IN Change Change Change	Addition  Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed of Santa Ros D D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D D'ERRICO, 874 BREVAF	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	p. Election Trust Fu  RECTORS  Delete  Delete	(NOTE: Registered Agent sign of Compaign Financing and Contribution.  11.  111.  111.  111.  111.  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  NAME	Anature required  A D J O R O R O R O R O R O R O R O R O R O	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE PY  LANCO, FL S  BARIC S  S MU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	A.	ayable of State TORS IN Change Change Change	Addition  Addition  Addition
SIGNATURE  10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME	Signature, typed of Santa Ros D D BUHL, KATH 989 TILLERY ORLANDO F D MAISANO, E 421 MCKEN SANTA ROS D D'ERRICO, 874 BREVAF	Printed name of registered agent  FEE IS \$61.25  OFFICERS AND DIF  BLEEN A WAY EL 32828  DARLENE NY ROAD EA FL 32459  RUDOLF RD CT	p. Election Trust Fu  RECTORS  Delete  Delete	(NOTE: Registered Agent signal Contribution.  11.  111.  111.  111.  111.  111.  111.  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  111.  NAME  STREET ADDRESS  CITY-ST-ZIP  111.  111.  111.	Anature required  A D J O R O R O R O R O R O R O R O R O R O	When reinstating)  \$5.00 May Be Added to Fees  ADDITIONS/CHANGE  Y, KATHLE PY  LANCO, FL S  BARIC S  S MU RIV	Ma D ES TO OFFICE EN A. WAY RJ828	A.	ayable of State TORS IN Change Change Change	Addition  Addition  Addition

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 or supplemental report is true and accurate and that 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with an other like empowered.

GNATURE:

### CONTINUES OF THE INDICATE STATES OF THE INDICATE STATE SIGNATURE:

Date