
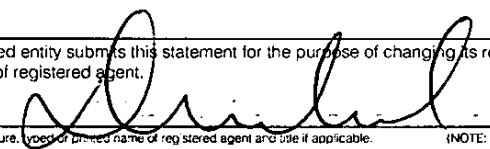
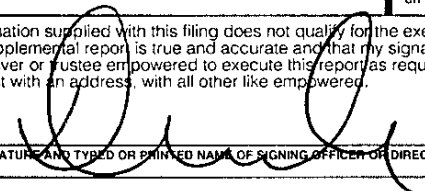


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 23, 2005 8:00 am
Secretary of State

03-23-2005 90041 005 ***150.00

DOCUMENT # P00000048874 1. Entity Name HOME EDGE INC.																																																																																																							
Principal Place of Business 604 N THORNTON AVE ORLANDO, FL 32803			Mailing Address 604 N THORNTON AVE ORLANDO, FL 32803																																																																																																				
2. Principal Place of Business 301 E. TARPON AVE Suite, Apt. #, etc. SUITE 2		3. Mailing Address 301 E TARPON AVE Suite, Apt. #, etc. SUITE 2																																																																																																					
City & State TARPON SPRINGS		City & State TARPON SPRINGS		4. FEI Number 59-3648133																																																																																																			
Zip 34689		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																			
6. Name and Address of Current Registered Agent KIRK, DENISE L 604 N THORNTON AVE ORLANDO, FL 32803			7. Name and Address of New Registered Agent Name DENISE L. KIRK Street Address (P.O. Box Number is Not Acceptable) 301 E. TARPON AVE SUITE 2 City TARPON SPRINGS FL Zip Code 34689																																																																																																				
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  DATE 3/21/05 <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent's signature required when reissuing)</small>																																																																																																							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																																																																				
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">P</td> <td style="width:40%;">NAME KIRK, DENISE</td> <td style="width:10%; text-align: center;"><input checked="" type="checkbox"/> Delete</td> <td style="width:30%;"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>604 N THORNTON AVE</td> <td></td> <td rowspan="2" style="vertical-align: middle; text-align: center;">ADDRESS CORRECTION →</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td>ORLANDO, FL 32803</td> <td></td> </tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> </table>			TITLE	P	NAME KIRK, DENISE	<input checked="" type="checkbox"/> Delete		STREET ADDRESS		604 N THORNTON AVE		ADDRESS CORRECTION →	CITY-ST-ZIP		ORLANDO, FL 32803																																					11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:10%;">P</td> <td style="width:40%;">NAME DENISE KIRK</td> <td style="width:10%; text-align: center;"><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition</td> <td style="width:30%;"></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td>301 E. TARPON AVE SUITE 2</td> <td></td> <td rowspan="2" style="vertical-align: middle; text-align: center;">ADDRESS CORRECTION →</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td>TARPON SPRINGS FL 34689</td> <td></td> </tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> <tr><td colspan="5"> </td></tr> </table>			TITLE	P	NAME DENISE KIRK	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		STREET ADDRESS		301 E. TARPON AVE SUITE 2		ADDRESS CORRECTION →	CITY-ST-ZIP		TARPON SPRINGS FL 34689																																				
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12. 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																							
SIGNATURE:  DATE 3/21/05 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>																																																																																																							