2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 21, 2007 8:00 am Secretary of State 03-21-2007 90038 038 ***158.75

DOCUMENT # P0000098471 1. Entity Name HOUSTON OF FLORIDA, INC.									
Principal Place of Business 1780 CROWN POINT WOODS CIRCLE 0COEE, FL 34761 Mailing Address 1780 CROWN POINT WOO 0COEE, FL 34761			/00DS CII	RCLE	-	UUU &0,	<i>307</i>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03132007	Chg-P	CR2E03	4 (12/06)		
City & State		City & State			4. FEI Numb 59-367			<u> </u>	plied For
Zip	Country	Zip	Coun	try		of Status Desir		8.75 Add	litional
	6. Name and Address of Current	Registered Agent			7. Name and	Address of N	ew Registered A	gent	
				Name L	LLICA	Pitts			
PITTS, HOUSTON				Street Address (P.O. Box Number is Not Acceptable)					
1780 CROWN POINT WOODS CIRCLE OCOEE, FL 34761				Street Address (P.O. Box Number is Not Acceptable)					
OCOEE, I	L 34701			1780	Crown	Point	Woods	Circ	ele
					coee		FL	Zio Code	761
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	registere	ed office or registe	red agent, or bo	th, in the State			and accept
SIGNATURE Signature. Speed or printed name of registered agent and bitle if appacable. (NOTE: Registered Agent signature required when reinstating) DATE									
FIL		9. Election Campa				_			
	E NOW!!! FEE IS \$150.00			+-	.00 мау Ве				ł
After Ma	ay 1, 2007 Fee will be \$550.	OO Trust Fund Con	tribution.	+-	ded to Fees		·- <u>-</u>		
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND	OO Trust Fund Con	tribution.	Add	ded to Fees	CHANGES TO	OFFICERS AND I		
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I nereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, 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.

3/16/07