

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90065 047 ***150.00

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1. Entity Name

PRIVATE I BUILDING INSPECTORS, INC.



Principal Place of Business
5711 BEAR LAKE CIRCLE
APOPKA FL 32703

Mailing Address
5711 BEAR LAKE CIRCLE
APOPKA FL 32703



2. Principal Place of Business - No P.O. Box #

1326 AMERICAN ELM DR

3. Mailing Address

1326 AMERICAN ELM DR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

Altamonte Springs FL

City & State

Altamonte Springs FL

4. FEI Number

59-3682774

Applied For

Not Applicable

Zip

Country

Zip

Country

32714

Seminole

32714

Seminole

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OUILLETTE, IRENE
5711 BEAR LAKE CIRCLE
APOPKA FL 32703

7. Name and Address of New Registered Agent

Name IRGNE OUILLETTE

Street Address (P.O. Box Number is Not Acceptable)

1326 AMERICAN ELM DR

City

Altamonte Springs

FL

Zip Code

32714

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 reissuing)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPVT
NAME OUILLETTE, IRENE
STREET ADDRESS 5711 BEAR LAKE CIRCLE
CITY - ST - ZIP APOPKA FL 32703 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

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CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DPVT
NAME IRENE OUILLETTE
STREET ADDRESS 1326 AMERICAN ELM DR
CITY - ST - ZIP Altamonte Springs FL 32714 ☒ Change ☐ Addition
ADDRESS ONLY

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

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CITY - ST - ZIP ☐ Change ☐ Addition

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE:

IRGNE OUILLETTE

3-10-07

4078107581

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #