2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000036465

City-St-Zip: ST CLOUD, FL 34772

Entity Name: CARE PROFESSIONAL HOME INSPECTIONS INC.

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	NTRYSIDE VIE D, FL 34772	EW DR		
Current Mailing Address:			New Mailing Address	s:
6854 W. F MIAMI, FL	LAGLER STRE 33144	EET		
FEI Number:	: 65-1098526	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:				
3211 COU ST. CLOU The above	DEZ, EDUARDO INTRYSIDE VII D, FL 34772 Inamed entity se of Florida.	EW DR. US	ourpose of changing its registere	d office or registered agent, or both,
SIGNATUR	RE:			
	Electron	ic Signature of Registered Age	ent	Date
Election Car	mpaign Financing	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	FERNANDEZ, É	/SIDE VIEW DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	FERNANDEZ, Á	Delete NGELA M YSIDE VIEW DR	Title: Name: Address:	() Change () Addition

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EDUARDO FERNANDEZ P 04/25/2006