2007 FOR PROFIT CORPORATION

ANNUAL REPORT FILED Apr 23, 2007 08:00 All Secretary of State DOCUMENT # P01000046142 1. Entity Name LEES' HOME SERVICES INC Principal Place of Business Mailing Address 32038 STERNS DR 32038 STERNS DR EUSTIS, FL 32736 EUSTIS, FL 32736 US CR2E034 (11/05) 01232007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 02-0616024 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DUHAMELL, LEE DO NOT WRITE 32038 STEARNS DR. **EUSTIS, FL 32736** IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 1.7 1 9. 'Election'Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 , After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS D TITLE DUHAMELL, LEE NAME STREET ADDRESS 32038 STERNA DR CITY-ST-ZIP EUSTIS, FL 32736 TITLE DUHAMELL, JODEE A NAME STREET ADDRESS 32038 STERNS DR. CITY-ST-ZIP EUSTIS, FL 32736 THE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE . . U000000721412 NAME .. . 05/01/07-80144-017-150.00 *** STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify 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 eath; 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

STREET ADDRESS CITY-ST-ZIP

AME OF SIGNING OFFICER OR DIRECTOR