

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000009002

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: A TO Z RESTORATION, INC.

## Current Principal Place of Business:

8303 NW 35 STREET  
CORAL SPRING, FL 33065 US

## New Principal Place of Business:

4220 NW 95 AVE  
CORAL SPRING, FL 33065 US

## Current Mailing Address:

8303 NW 35 STREET  
CORAL SPRING, FL 33065 US

## New Mailing Address:

4220 NW 95 AVE  
CORAL SPRING, FL 33065 US

FEI Number: 30-0381628

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LEANDRE, HUBERT  
8303 NW 35 STREET  
CORAL SPRING, FL 33065 US

## Name and Address of New Registered Agent:

LEANDRE, JAMES  
8303 NW 35 STREET  
CORAL SPRING, FL 33065 US

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.

SIGNATURE: JAMES LEANDRE

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LEANDRE, HUBERT  
Address: 8303 NW 35 STREET  
City-St-Zip: CORAL SPRING, FL 33065 US

Title: VP ( ) Delete  
Name: THEUS, MARIE C  
Address: 8303 NW 35 STREET  
City-St-Zip: CORAL SPRING, FL 33065 US

Title: SD ( ) Delete  
Name: SOMMERS, JANET  
Address: 809 E PALM RUN DR  
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: JEAN-PIERRE, OXANNE  
Address: 809 E PALM RUN DR  
City-St-Zip: NORTH LAUDERDALE, FL 33068 US

Title: VP (X) Change ( ) Addition  
Name: LEANDRE, JAMES  
Address: 8303 NW 35 STREET  
City-St-Zip: CORAL SPRING, FL 33065 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JAMES LEANDRE

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date