

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000021203

FILED
Mar 14, 2007
Secretary of State

Entity Name: REAL ESTATE MAINTENANCE & REPAIR, INC.

Current Principal Place of Business:

2910 SW 87 TARRACE
#1709
DAVIE, FL 33328

New Principal Place of Business:

2118 N. 43 AVENUE
HOLLYWOOD, FL 33021

Current Mailing Address:

2910 SW 87 TARRACE
#1709
DAVIE, FL 33328

New Mailing Address:

2118 N. 43 AVENUE
HOLLYWOOD, FL 33021

FEI Number: 38-3642835

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLINGSWORTH, CHARLES H
2910 SW 87 TERRACE
#1709
FORT LAUDERDALE, FL 33328 US

Name and Address of New Registered Agent:

ELLINGSWORTH, CHARLES H
2118 N.3 AVENUE
HOLLYWOOD, FL 33021 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: CHARLES ELLINGSWORTH

03/14/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ELLINGSWORTH, CHARLES H
Address: 2910 SW 87 TERRACE #1709
City-St-Zip: FORT LAUDERDALE, FL 33328

Title: VP-P () Delete
Name: BAUM, WILLIAM VP-PROD
Address: 1601 N. 70TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ELLINGSWORTH, CHARLES H
Address: 2118 N. 43 AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP-P (X) Change () Addition
Name: BAUM, WILLIAM VP-PROD
Address: 2118 N. 43 AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

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: CHARLES ELLINGSWORTH

PD

03/14/2007

Electronic Signature of Signing Officer or Director

Date