

FILED  
Sep 08, 2003 8:00 am  
Secretary of State

09-08-2003 90324 024 \*\*\*150.00

2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

80145677

|   |               |   |               |
|---|---------------|---|---------------|
| <b>DOCUMENT # P02000051382</b>  |               |   |               |
| 1. Entity Name<br><b>RELIABLE HOME REPAIR, INC.</b>   |               |   |               |
| Principal Place of Business<br>12605 LAKE BUTLER BOULEVARD<br>WINDERMERE, FL 34786  |               | Mailing Address<br>12605 LAKE BUTLER BOULEVARD<br>WINDERMERE, FL 34786  |               |
| 2. Principal Place of Business<br>2532 Waterview Pl.<br>Suite, Apt. #, etc.   |               | 3. Mailing Address<br>2532 Waterview Pl.<br>Suite, Apt. #, etc.   |               |
| City & State<br>Windermere, FL  |               | City & State<br>Windermere, FL  |               |
| Zip<br>34786  | Country<br>US | Zip<br>34786  | Country<br>US |
| 4. FEI Number<br>61-1418431   |               | Applied For<br>Not Applicable   |               |
| 5. Certificate of Status Desired <input type="checkbox"/>   |               | \$8.75 Additional Fee Required  |               |
| 6. Name and Address of Current Registered Agent<br>MILLER, SOUTH & MILHAUSEN, P.A.<br>% JEFFREY P. MILHAUSEN<br>2699 LEE ROAD, SUITE 120<br>WINTER PARK, FL 32789   |               |   |               |
| 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br>FL Zip Code  |               |   |               |
| 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.<br>SIGNATURE <u>Mark Cox</u> <u>MARK COX</u> DATE <u>9-04-03</u><br><small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's Signature required when establishing)</small>   |               |   |               |
| FILE NOW!!! FEE IS \$150.00<br>After May 1, 2003 Fee will be \$550.00<br>Amended UBR is \$61.25<br>Make Check Payable to Florida Department of State  |               | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |               |
| 10. OFFICERS AND DIRECTORS  |               | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11   |               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               |
| PSD<br>COX, MARK C<br>12605 LAKE BUTLER BOULEVARD<br>WINDERMERE, FL 34786   |               | PSD<br>COX, MARK C<br>2532 Waterview Pl.<br>Windermere, FL 34786  |               |
| <input type="checkbox"/> Delete   |               | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                                    |               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               |
| <input type="checkbox"/> Delete   |               | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               |
| <input type="checkbox"/> Delete   |               | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               |
| <input type="checkbox"/> Delete   |               | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |               |
| <input type="checkbox"/> Delete   |               | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |               |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Mark Cox</u> <u>MARK COX</u> DATE <u>9-04-03</u><br><small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>   |               |   |               |

Attachment

Reliable Home Repair, Inc.  
2532 Waterview Pl.  
Windermere, FL 34786-8330

80145677  
#P02000051382

September 2, 2003

Annual Reports Filings  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Dear Sir or Madam,

It was recently brought to our attention that the annual corporate renewal was not received due to a corporate address change. While speaking with our new accountant the matter was brought up and after some research we found that this renewal was not received and therefore not filed. We have enclosed the annual renewal form along with the payment of \$150.00. We respectfully request that the corporate address be updated so that we are able to file timely next year. If you have any questions please contact me at your convenience.

Sincerely,

*Mark Cox*

Mark Cox  
President