

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000060853

FILED  
Mar 22, 2007  
Secretary of State

Entity Name: CONCIERGE HOME SERVICES, INC.

## Current Principal Place of Business:

8456 W. OAKLAND PARK BLVD.  
SUNRISE, FL 33351

## New Principal Place of Business:

3601 W COMMERCIAL BLVD.  
14  
FORT LAUDERDALE, FL 33309 US

## Current Mailing Address:

8456 W. OAKLAND PARK BLVD.  
SUNRISE, FL 33351

## New Mailing Address:

3601 W COMMERCIAL BLVD.  
14  
FORT LAUDERDALE, FL 33309 US

FEI Number: 27-0014427

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAVAGE, DEBRA R  
8456 W. OAKLAND PARK BLVD.  
SUNRISE, FL 33351 US

## Name and Address of New Registered Agent:

SAVAGE, DEBRA R  
3601 W COMMERCIAL BLVD.  
14  
FORT LAUDERDALE, FL 33309 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: CONCIERGE HOME SERVICES, INC

03/22/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SAVAGE, DEBRA R  
Address: 2560 SW 102 DR.  
City-St-Zip: DAVIE, FL 33351

Title: V ( ) Delete  
Name: SMITH, ANITA M  
Address: 3166 NW 68 ST.  
City-St-Zip: FT. LAUDERDALE, FL 33309

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: DEBRA SIGNORE SAVAGE

P

03/22/2007

Electronic Signature of Signing Officer or Director

Date