

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 91043 024 ***150.00

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1. Entity Name
FOR YOUR HOME, INC.



Principal Place of Business
100 S FLAMINGO RD
PEMBROKE PINES FL 33027

Mailing Address
100 S FLAMINGO RD
PEMBROKE PINES FL 33027



2. Principal Place of Business

2201 W SAMPLE RD

3. Mailing Address

2201 W SAMPLE RD

Suite, Apt. #, etc.

BLDG 6, SUITES 61AB

Suite, Apt. #, etc.

BLDG 6, SUITES 61AB

City & State

POHANO BEACH FL

City & State

POHANO BEACH FL

Zip

33073

Country

USA

Zip

33073

Country

USA

4. FEI Number

22-3884700

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

RICCIO, JAMES

100 S FLAMINGO RD

PEMBROKE PINES FL 33027

7. Name and Address of New Registered Agent

Name

JAMES RICCIO

Street Address (P.O. Box Number is Not Acceptable)

2201 W SAMPLE RD SUITE 61AB

BLDG 6

City

POHANO BEACH

FL

Zip Code

33073

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

JAMES RICCIO

2/11/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **RICCIO, JAMES**
STREET ADDRESS **100 S FLAMINGO RD**
CITY-ST-ZIP **PEMBROKE PINES FL 33027**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2201 W. SAMPLE RD BLDG 6 SUITES 61AB**
CITY-ST-ZIP **POHANO BEACH FL 33073**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

JAMES RICCIO
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/11/03 954-974-4860

CR2E034 (10/02)