

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P02000125767

Entity Name  
S.P. HOME INVESTMENT, INC.



Principal Place of Business  
4260 W. 19TH AVE.  
HIALEAH, FL 33012

Mailing Address  
4260 W. 19TH AVE.  
HIALEAH, FL 33012



01092006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
13-4222882

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BERTOT, MARIELA F  
4260 W. 19TH AVE.  
HIALEAH, FL 33012

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reconstituting)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

1100800396414  
01/30/06-80007-019 150.00

**OFFICERS AND DIRECTORS**

PD  
BERTOT, MARIELA F  
4260 W. 19TH AVE.  
HIALEAH, FL 33012

SD  
PEREZ, GILBERT R  
4260 W. 19TH AVE.  
HIALEAH, FL 33012

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IN THIS SPACE**

12 I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of this 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 provided, or on an attachment with an address, with a signature like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-12-06 (305) 557-0328

Date

Daytime Phone #