

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 FEB 19 AM 9:31

DOCUMENT # P03000023111

1. Entity Name
HOMEXPERTS, INC.



Principal Place of Business
10700 N. KENDALL DRIVE, SUITE 401
MIAMI, FL 33176

Mailing Address
10700 N. KENDALL DRIVE, SUITE 401
MIAMI, FL 33176

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

City & State
Zip Country

02112008 Chg-P CR2E034 (12/06)

4. FEI Number
57-1153068

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

VILLENA, ROBERT
11767 SW 93 TERR
MIAMI, FL 33176

7. Name and Address of New Registered Agent

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

SIGNATURE _____
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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	IRAOLA, MANUEL J	
STREET ADDRESS	812 ALFONSO AVENUE	
CITY-ST-ZIP	CORAL GABLES, FL 33146	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	VILLENA, JOSE A	
STREET ADDRESS	9081 SW 124 STREET	
CITY-ST-ZIP	MIAMI, FL 33176	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	VILLENA, MARIO A	
STREET ADDRESS	7501 SW 82 COURT	
CITY-ST-ZIP	MIAMI, FL 33143	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	KENNEDY, WILLIAM P	
STREET ADDRESS	19427 SW65 ST	
CITY-ST-ZIP	FORT LAUDERDALE, FL 33332	
TITLE	VSTD	<input type="checkbox"/> Delete
NAME	VILENA, ROBERT A	
STREET ADDRESS	11767 SW 93 TERR	
CITY-ST-ZIP	MIAMI, FL 33186	
TITLE	VP	<input type="checkbox"/> Delete
NAME	VILLENA, JOSE A SR.	
STREET ADDRESS	9205 SW 32 STREET	
CITY-ST-ZIP	MIAMI, FL 33165	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	800119105538
CITY-ST-ZIP	02/29/08--01010--002 **\$150.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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 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: Robert Villena ROBERT VILLENA

2/11/08

(305) 351-8641

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Page 2

Block 10.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP
CORREA, RAQUEL M.
10365 NW 48 STREET
MIAMI, FL 33178

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VP
IRAOLA, CARLOS G.
216 ROMANO AVENUE
MIAMI, FL 33134