2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000091711

Entity Name: HOME INHANCEMENTS, INC.

FILED Aug 29, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1222 MERLYN STREET 4826 CELIA CIRCLE EAST LAKELAND, FL 33813 US LAKELAND, FL 33813 US

Current Mailing Address: New Mailing Address:

1222 MERLYN STREET

LAKELAND, FL 33813 US

4826 CELIA CIRCLE EAST
LAKELAND, FL 33813 US

FEI Number: 20-0167130 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AMERICA'S BUSINESS MANAGER, INC.

111 SECOND AVENUE NE
SUITE 805
ST. PETERSBURG, FL 33701 US

WALKER, TINAL M P
4826 CELIA CIRCLE EAST
LAKELAND, FL 33813 U

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: TINA M WALKER 08/29/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition WALKER, TINA M WALKER, TINA M Name: Name: 1222 MERLYN STREET 4826 CELIA CIRCLE EAST Address: Address: City-St-Zip: LAKELAND, FL 33813 US City-St-Zip: LAKELAND, FL 33813 US

Title: VP () Delete Title: VP (X) Change () Addition Name: WALKER, ROBERT T WALKER, ROBERT T

Name:WALKER, ROBERT TName:WALKER, ROBERT TAddress:1222 MERLYN STREETAddress:4826 CELIA CIRCLE EASTCity-St-Zip:LAKELAND, FL 33813 USCity-St-Zip:LAKELAND, FL 33813 US

Title: S () Delete Title: S (X) Change () Addition

 Name:
 KRAUS, CHAD M
 Name:
 KRAUS, CHAD M

 Address:
 1222 MERLYN STREET
 Address:
 4826 CELIA CIRCLE EAST

 City-St-Zip:
 LAKELAND, FL 33813 US
 City-St-Zip:
 LAKELAND, FL 33813 US

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: TINA M WALKER P 08/29/2006