

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000132358

FILED
Feb 04, 2008
Secretary of State

Entity Name: ULTIMATE HOME SOLUTIONS, INC

Current Principal Place of Business:

4267 NW FEDERAL HWY SUITE 109
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

4267 NW FEDERAL HWY SUITE 109
JENSEN BEACH, FL 34957

New Mailing Address:

19706 ONE NORMAN BLVD
SUITE B205
CORNELIUS, NC 28031

FEI Number: 56-2422523

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRIS, KATHLEEN
4267 NW FEDERAL HWY STE 109
JENSEN BEACH, FL 34957 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MORRIS, KATHLEEN
Address: 4267 NW FEDERAL HWY STE 109
City-St-Zip: JENSEN BEACH, FL 34957

Title: D () Delete
Name: MACDONALD, PATRICIA A
Address: 4267 NW FEDERAL HWY. STE 109
City-St-Zip: JENSEN BEACH, FL 34957

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 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: KATHLEEN MORRIS

D

02/04/2008

Electronic Signature of Signing Officer or Director

Date