

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000134902

FILED
Jun 30, 2009
Secretary of State

Entity Name: IDEAL HOMES & REMODELING, INC.

Current Principal Place of Business:

2712 WEST DEWEY STREET
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

2712 WEST DEWEY STREET
TAMPA, FL 33607

New Mailing Address:

FEI Number: 20-0414214

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VALIENTE, ELIZABETH C
2712 WEST DEWEY STREET
TAMPA, FL 33607 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARBALLO, UBALDO V
Address: 2712 WEST DEWEY STREET
City-St-Zip: TAMPA, FL 33607

Title: VP () Delete
Name: VALIENTE, ELIZABETH
Address: 2712 WEST DEWEY STREET
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VALIENTE, ELIZABETH C
Address: 2712 WEST DEWEY STREET
City-St-Zip: TAMPA, FL 33607

Title: OFFI (X) Change () Addition
Name: VALIENTE, UBALDO
Address: 2712 WEST DEWEY STREET
City-St-Zip: TAMPA, FL 33607

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: ELIZABETH VALIENTE

EV

06/30/2009

Electronic Signature of Signing Officer or Director

Date