

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000026733

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: HOME FACE LIFTERS, INC.

## Current Principal Place of Business:

616 MARINER WAY  
ALTAMONTE SPRINGS, FL 327015434 US

## New Principal Place of Business:

## Current Mailing Address:

616 MARINER WAY  
ALTAMONTE SPRINGS, FL 327015434 US

## New Mailing Address:

FEI Number: 20-0728765

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PENA, ALEXANDER PRES  
616 MARINER WAY  
ALTAMONTE SPRINGS, FL 327015434 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: P ( ) Delete  
Name: PENA, ALEXANDER PRES  
Address: 616 MARINER WAY  
City-St-Zip: ALTAMONTE SPRINGS, FL 327015434 US

Title: VP ( ) Delete  
Name: PENA, CAROLINA R VP  
Address: 616 MARINER WAY  
City-St-Zip: ALTAMONTE SPRINGS, FL 327015434 US

Title: SEC ( ) Delete  
Name: PENA, MARINO A SEC  
Address: 616 MARINER WAY  
City-St-Zip: ALTAMONTE SPRINGS, FL 327015434 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ALEXANDER PENA

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date