

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90089 018 ***150.00

DOCUMENT # P04000030548

1. Entity Name
V & H REMODELING, INC.



Principal Place of Business
1978 WINDERMERE ROAD
WINDERMERE, FL 34786

Mailing Address
1978 WINDERMERE ROAD
WINDERMERE, FL 34786

DO NOT WRITE IN THIS SPACE



04122007 No Chg-P CR2E034 (11/05)

4. FEI Number
20-0735205

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUKHI, SOOKLALL
1978 WINDERMERE ROAD
WINDERMERE, FL 34786

**DO NOT WRITE
IN THIS SPACE**

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 reappointing)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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
NAME DUKHI, SOOKLALL
STREET ADDRESS 1978 WINDERMERE ROAD
CITY-ST-ZIP WINDERMERE, FL 34786

TITLE STD
NAME DUKHI, HAFEEZ ZON
STREET ADDRESS 1978 WINDERMERE ROAD
CITY-ST-ZIP WINDERMERE, FL 34786

TITLE
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CITY-ST-ZIP

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IN THIS SPACE**

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SOOKLALL DUKHI

4/12/07
Date

407-770-8706
Daytime Phone #