2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000046598

City-St-Zip:

MISSION DIEGO, CA 92692

Entity Name: CNH CONSTRUCTION & REMODELING, INC.

FILED May 04, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1515 NE 2ND AVENUE 1515 NE 22ND AVENUE OCALA, FL 34470 OCALA, FL 34470 **Current Mailing Address: New Mailing Address:** P.O.BOX 794 OCALA, FL 34478 FEI Number: 42-1621224 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: ALBRITTON, DAVID EAGLE ACCOUNTING & TAXES LLC 7575 W HWY 326 320 W OAK TERRACE DR OCALA, FL 34482 US SUITE 150 LEESBURG, FL 34748 US 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: RENEE STOFFEL 05/04/2007 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ALBRITTON, DAVID Name: Name: P O BOX 794 Address: Address: City-St-Zip: OCALA, FL 34478 City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: ROGERS, NAOMI Name: ALBRITTON, TINA 1064 NW 67TH PLACE PO BOX 794 Address: Address: OCALA, FL 34478 OCALA, FL 34478 City-St-Zip: City-St-Zip: (X) Change () Addition Title: () Delete Title: RENTZ, SAUL ALBRITTON, TINA Name: Name: 15019 NW 134TH TERR 1515 NE 22ND AVE Address: Address: City-St-Zip: ALACHUA, FL 32616 City-St-Zip: OCALA, FL 34470 Title: () Delete Title: (X) Change () Addition LEGRANDE, CHRIS WARREN, WOODARD Name: Name: Address: 27540 GLENWOOD DR R Address: 1515 NE 22ND AVE

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.

City-St-Zip:

OCALA, FL 34470

SIGNATURE: TINA ALBRITTON S 05/04/2007