# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED**
**Oct 26, 2008**
**Secretary of State**

DOCUMENT# P04000051761

**Entity Name:** MR. B'S HOME REPAIR INC.

**Current Principal Place of Business:**

10847 S.W. 67TH TERRACE
OCALA, FL 34476

**New Principal Place of Business:**

4699 N. STATE RD 7
K
FT. LAUDERDALE, FL 33319

**Current Mailing Address:**

10847 S.W. 67TH TERRACE
OCALA, FL 34476

**New Mailing Address:**

4699 N. STATE RD. 7
K
FT. LAUDERDALE, FL 33319

**FEI Number: 01-0810985** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROWN, SHARON J
10847 S.W. 67TH TERRACE
OCALA, FL 34476 US

**Name and Address of New Registered Agent:**

GOMEZ, PAULA ANDREA
4699 N. STATE RD 7
K
FT. LAUDERDALE, FL 33319 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: PAULA GOMEZ 10/26/2008
Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete
Name: BROWN, SHARON J
Address: 10847 SW 67TH TERR
City-St-Zip: OCALA, FL 34476

Title: VP (X) Delete
Name: BROWN, EDWARD L
Address: 10847 SW 67TH TERR
City-St-Zip: OCALA, FL 34476

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition
Name: GOMEZ, PAULA ANDREA
Address: 4699 N. STATE RD 7 SUITE K
City-St-Zip: FT. LAUDERDALE, FL 33319

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: PAULA GOMEZ P 10/26/2008
Electronic Signature of Signing Officer or Director Date