

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000071601

FILED
Apr 27, 2006
Secretary of State

Entity Name: FLORIDA REAL ESTATE HOME INSPECTORS, INC.

Current Principal Place of Business:

2020 NE 163 ST SUITE 300
N MIAMI BEACH, FL 33162

New Principal Place of Business:

4725 SW 45 ST
DAVIE, FL 33314

Current Mailing Address:

2020 NE 163 ST SUITE 300
N MIAMI BEACH, FL 33162

New Mailing Address:

4725 SW 45 ST
DAVIE, FL 33314

FEI Number: 20-1344797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROMAN, ANGEL
3215 NE 184 ST APT 14201
AVENTURA, FL 33160 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: ROMAN, ANGEL
Address: 3215 NE 184 ST APT 14201
City-St-Zip: AVENTURA, FL 33160

Title: V () Delete
Name: LOPEZ, MARIA
Address: 2020 NE 163 ST SUITE 300
City-St-Zip: N MIAMI BEACH, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: ANGEL ROMAN

P

04/27/2006

Electronic Signature of Signing Officer or Director

Date