2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2007 08:00 A
Secretary of State

DOCUMENT # P04000106109

1. Entity Name
SHERLOCK HOME INSPECTIONS AND IMPROVEMENTS INC.

Principal Place of Business	Mailing Address
2425 E HARPER ST TAMPA, FL 33605 US	2425 E HARPER ST TAMPA, FL 33605 US

03262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1386496
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CALERO, JUAN A
2425 E HARPER ST
TAMPA, FL 33605

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	P
NAME	CALERO, JUAN A
STREET ADDRESS	2425 E HARPER ST
CITY-ST-ZIP	TAMPA, FL 33605
TITLE	VP
NAME	PUGA, NELSON A SR
STREET ADDRESS	2425 E HARPER ST
CITY-ST-ZIP	TAMPA, FL 33605
TITLE	S
NAME	MORALES, ALFREDO
STREET ADDRESS	833 GRAND CENTRAL ST
CITY-ST-ZIP	CLEARWATER, FL 33756
TITLE	T
NAME	SOLACHE, PEDRO
STREET ADDRESS	2225 E 131 ST AVENUE
CITY-ST-ZIP	TAMPA, FL 33612
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/05/07-80008-016 150.00

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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: _____ 3/26/07 (813)241-4740
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #