2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P04000107002 1. Entity Name A TO Z REMODELING SERVICE, INC.							DIVISI	FILED CRETARY OF S ON OF CORPOR IUL -5 AM	RAHUMS			
Principal Place of Business 2546 NORTH WEST-120TH TERR CORAL SPRINGS, FL 33065 Mailing Address 2546 NORTH WEST-120TH TERR CORAL SPRINGS, FL 33065							CENTUR			II 46 1II 81 III 18 1	KOOL IN 1001	
2. Principal P	lace of Busin	less 23 Place	3. Mailing Address 3791 NW Z3 Place									
Suite, Apt.			Suite, Apt. #, etc.				06022005	Chg-P	CR2E03	84 (10/03)		
COCONU	it Cre	rek Fl	City & State Coconut Creek Fl				4. FEI Numb NOT AF	er PPLICABLE		 	plied For t Applicable	
^{Zip} 330	33066 Country USA		^{Zip} 33066				5. Certificate of Status Desired Fee Re			8.75 Add ee Required		
Name and Address of Current Registered Agent						1 . 1		Address of New F		gent		
BUITRAGO DARIO J 2546 NORTH WEST 120TH TERR CORAL SPRINGS, FL 33065						Street Address (P.O. Box Number is Not Acceptable) 3791 Nw 23 Place						
<u> </u>						CONU	t Cree	· K	FL	Zip Code	266	
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 reinstating) DATE												
9. Election Campaign Financing \$5.00 May Be												
	ionada Ar		Adde	ed to Fees								
, 10. TITLE	OFFICERS AND DIRECTORS P Delete						ADDITIONS	/CHANGES TO OFF	ICERS AND	DIRECTORS Change	Addition	
NAME	BUITRAG	O, DARIO J	NAM		E					onunge	7,001,001	
STREET ADDRESS CITY-ST-ZIP	1	RTH WEST 120TH TER PRINGS, FL 33065	R	STREET City-s							Ì	
TITLE	V Delete			TUTLE	Ē	P		A = 4 = -:		☐ Change	Addition	
NAME STREET ADDRESS	t .	L, ANTONIO J RTH WEST 120TH TER	NAM STRE		EET ADDRESS	379	correal, Antonio J. 791 Nw 23 Place					
CITY-ST-ZIP	CORAL SPRINGS, FL 33065				-ST-ZIP	Coce		reek fl	*******			
TITLE NAME	☐ Delete TITLE NAM.						Ū	00057	4326	Change	☐ Addition	
STREET ADDRESS	STE				ET ADDRESS		07/1	3/050106	8002	**B1.;	25	
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NAME			☐ Delete	NAM	E .					onengo		
STREET ADDRESS CITY-ST-ZIP				1	ET ADDRESS -ST-ZIP							
TITLE	☐ Delete TITE									☐ Change	☐ Addition	
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CITY-ST-ZIP				_	-ST-ZIP							
TITLE NAME			☐ Delete	TITLE						☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP				1	ET ADDRESS -ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true end adjurate 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 redeiver of true tee empowered to exacute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with a address, with all other like empowered.												
SIGNAT	UKE: _	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICER	OR DIRECT	TOR			OCT	<u>رں -</u>	561 84	2226	