2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 01, 2005 8:00 am Secretary of State 06-17-2005 90001 014 ***150.00

DOCUMENT # P04000157545 1. Entity Name BERAUN HOME IMPROVEMENT, INC.						06-17-200	90001	014 ***	150.00
Principal Place 4400 HIDDEN KISSIMMEE, F	N MEADOW DRIVE	Mailing Address 4400 HIDDEN MEADOW KISSIMMEE, FL 34746		66024073					
2. Principal Place of Business 3. Mailing Address									
Suite, Apt.	#, elc.	Suite, Apt. #, etc.			04212005	Chg-P	CR2E0	34 (10/03)	
City & State		City & State		4. FEI Numb	er .			oplied For	
Zip	Country	Zip Count		try	5. Certificate	of Status Desired		\$8.75 Add	
	- 6. Name and Address of Current F	legistered Agent	-	_	7. Name sno	Address of New			
-	Namo 20-190-1189								
BERAUN, ANTONIO 4400 HIDDEN MEADOW DRIVE KISSIMMEE, FL 34746 ;				Street Address (P.O. Box Number is Not Acceptable)					
				0	<u></u>			13.0	
<u> </u>				City			FL	Zip Cod	
	named entity submits this statement for ions of registered agent.	the purpose of changing its	register	ed office or registe	red agent, or bo	oth, in the State of F	iorida. I am	lamiliar with,	and accept
SIGNATURE_	Signature, typed or printed name of registered agent a	nd inte if applicable. (NOTE	: Registere	d Agent signature require	d when reinstaong)		DATE		
FIL	E NOW!!! FEE IS \$150.00	Election Campal Trust Fund Conti		ncing \$5	.00 May Be				, 1
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS	CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11
TITLE	PSD BERAUN, ANTONIO	☐ Deleta	TITLE	1				Change	Addition
STREET ADDRESS	4400 HIDDEN MEADOW DRIVE KISSIMMEE, FL 34746		STRE	ET ADORESS -ST-DP					_
- TITLE	VT	☐ Delete	TITLE					Change	Addition
"NAME STREET ADDRESS	BERAUN, NUBIA 4400 HIDDEN MEADOW DRIVE		NAM! STRE	E Et adoress					
CITY-SI-ZIP	KISSIMMEE, FL 34748			-\$1-ZIP					
TITLE	- 1	Delete	TITLE NAM		•			Change -	- Addition
STREET ADDRESS			STRE	ET ADDRESS					
CITY-ST-ZIP		☐ Defeta	CITY TITU	-ST-ZP	 -			Change	F.I. Aldilion
NAME -			NAM	Ε				Hall VIEWING	El Addition
STREET ADDRESS				ET ADORESS - ST - ZUP					
TITLE		☐ Deleta	пти					Change	☐ Addition
STREET ADDRESS	,	٦	NAM STRE	e Et address					
⇔alty-SI-ZIP		1		-ST-ZIP					
TITLE NAME		′ ☐ Deleta	TIELE	- 1				☐ Custude	Addition
STREET ADDRESS	//		STRE	ET ADORESS					_
12. I hereby of indicated of the conchanged,	certify that the information supplied with on this report or supplemental report is poration or the receipter or trustee embo- or on an attachment with anyadomass,	this filling abes not quality or true and accurate and that n wered/o execute this report with all other like amplowered.	_	-SI-ZP mption stated in Siture shall have the red by Chapter 60	ection 119.07(3) same legal effe 7, Florida Statut	(i), Florida Statutes ct as if made under es; and that my nar	. I further cer oath; that I a ne appears i	tlfy that the in an officer a Block 10 or	nformation or director r Block 11 if
SIGNAT	URE: X X X X X X X X X X X X X X X X X X X	RINTED HAME OF SKINGING OFFICER	OR DIRECT	ron	L	1/11/05	407	4/45	234
•			, "- '		-				ion

ATTACHMENT 46624073

June 27, 2005

Florida Department of State Division of Corporation P.O. Box 1500 Tallahassee, Florida 32302-1500

Dear: Sirs

We are sending you this payment and at the same time voice our apology to you for not having it paid sooner. We started our business this past year and incorporated on November 18, 2004. It came as quite a shock and surprise to us that we had to pay \$150.00 for the renewal of our company since we never received any letter or information from you. Please note our new address and other information you require. Please accept the enclosed and adjust the records accordingly. Should you have any question, you may give me a call at 407-931-0002. Thank you.

Sincerely,

Antonio Beraun
President
Beraun Home-Improvement, Inc.
-Doc# P04000157545