2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000164764

Entity Name: OPEN HOUSE, ALL PEOPLES HOMES SMART HOUSING, INC.

FILED May 07, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Outlette interpart face of Basiness.	11CW IIIIOIPAI IAOC OI BASIIICSS.

5740 ROCK ISLAND RD. 6757 PETUNIA DRIVE #297 MIRAMAR, FL 33023

TAMARAC, FL 33319

Current Mailing Address: New Mailing Address:

5740 ROCK ISLAND RD. 6757 PETUNIA DRIVE #297 MIRAMAR, FL 33023 TAMARAC, FL 33319

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

GACHELIN, LOUIS
5740 ROCK ISLAND RD.
#297
TAMARAC, FL 33319 US
GACHELIN, LOUIS
6757 PETUNIA DRIVE
MIRAMAR, FL 33023 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: 05/07/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CHRM () Delete Title: CHRM (X) Change () Addition

 Name:
 GACHELIN, LOUIS
 Name:
 GACHELIN, LOUIS

 Address:
 5740 ROCK ISLAND RD. #297
 Address:
 6757 PETUNIA DRIVE

 City-St-Zip:
 TAMARAC, FL 33319
 City-St-Zip:
 MIRAMAR, FL 33023

Title: PT () Delete Title: PT (X) Change () Addition

 Name:
 GACHELIN, LOUIS
 Name:
 GACHELIN, LOUIS

 Address:
 5740 ROCK ISLAND RD. #297
 Address:
 6757 PETUNIA DRIVE

 City-St-Zip:
 TAMARAC, FL 33319
 City-St-Zip:
 MIRAMAR, FL 33023

Title: SV () Delete Title: SV (X) Change () Addition

 Name:
 EXANTUS, MARGARET
 Name:
 GACHELIN, MARGARET

 Address:
 5740 ROCK ISLAND RD. #297
 Address:
 6757 PETUNIA DRIVE

 City-St-Zip:
 TAMARAC, FL 33319
 City-St-Zip:
 MIRAMAR, FL 33023

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: LOUIS GACHELIN CHRM 05/07/2006