## 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P04000170701

Entity Name: BENJAMIN HOME INSPECTION SERVICES, INC.

FILED Nov 17, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

11033 SW 5TH COURT BUILDING # 18 APT 302 PEMBROKE PINES, FL 33025

Current Mailing Address: New Mailing Address:

P.O. BOX 245884 PEMBROKE PINES, FL 33024

FEI Number: 34-2028578 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

 LOUIS, MARIE K
 MAXIS, JEAN K

 1065 NW 124TH ST
 361 NW 103RD STREET

 NORTH MIAMI, FL 33168
 US

 MIAMI, FL 33150
 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: JEAN MAXIS 11/17/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BENJAMIN, PAUL A
 Name:

 Address:
 PO BOX 245884
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33024
 City-St-Zip:

Title: P ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BENJAMIN, PAUL A
 Name:

 Address:
 PO BOX 245884
 Address:

 City-St-Zip:
 PEMBROKE PINES, FL 33024
 City-St-Zip:

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

 Name:
 LOUIS, MARIE K
 Name:
 MAXIS, JEAN K

 Address:
 1065 NW 124TH ST
 Address:
 361 NW 103RD STREET

 City-St-Zip:
 NORTH MIAMI, FL 33168
 City-St-Zip:
 MIAMI, FL 33150

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PAUL BENJAMIN O/P 11/17/2005