2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000170701

FILED Jun 05, 2007 Secretary of State

Entity Name: BENJAMIN HOME INSPECTION SERVICES, INC.

Current F	rincipal Place	of Business:	New Principal Place	e of Business:
	TH STREET IIAMI BEACH, F	FL 33162		
Current N	lailing Addres	s:	New Mailing Addres	ss:
P.O. BOX PEMBRO	245884 KE PINES, FL 3	33024		
FEI Number	: 34-2028578	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
MAXIS, JE 361 NW 1 MIAMI, FL	03RD STREET			
V /~ V , ∟	33150 US			
The above		ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
The above in the Stat	named entity s e of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
The above in the Stat	e named entity s e of Florida. RE:	ubmits this statement for the		ed office or registered agent, or both, Date
The above n the Stat SIGNATU n accordar	e named entity see of Florida. RE: Electronice with s. 607.193	ic Signature of Registered Ag 3(2)(b), F.S., the corporation did n	ent	
The above in the Stat SIGNATU in accordar Election Ca	e named entity see of Florida. RE: Electronice with s. 607.193	ic Signature of Registered Ag 8(2)(b), F.S., the corporation did n Trust Fund Contribution ().	ent ot receive the prior notice.	
The above in the State SIGNATU accordar Election Ca OFFICER Title: Name: Address:	e named entity see of Florida. RE: Electronice with s. 607.193 mpaign Financing S AND DIRECT	ic Signature of Registered Ag 8(2)(b), F.S., the corporation did n Trust Fund Contribution (). FORS: Delete JL A	ent ot receive the prior notice.	Date
The above in the Stat SIGNATU in accordar Election Ca	e named entity see of Florida. RE: Electronice with s. 607.193 mpaign Financing S AND DIRECT O () BENJAMIN, PAU PO BOX 245884 PEMBROKE PIN	ic Signature of Registered Ag 8(2)(b), F.S., the corporation did n Trust Fund Contribution (). FORS: Delete JL A NES, FL 33024 Delete JL A	ent ot receive the prior notice. ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify 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: PAUL BENJAMIN O 06/05/2007