

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000170701

FILED  
Aug 30, 2008  
Secretary of State

Entity Name: BENJAMIN HOME INSPECTION SERVICES, INC.

## Current Principal Place of Business:

89 NE 154TH STREET  
NORTH MIAMI BEACH, FL 33162

## New Principal Place of Business:

11551 BLUE WARBLER DR.  
FORT MYERS, FL 33908

## Current Mailing Address:

P.O. BOX 245884  
PEMBROKE PINES, FL 33024

## New Mailing Address:

PO BOX 9246  
FORT MYERS, FL 33902

FEI Number: 34-2028578

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAXIS, JEAN K  
361 NW 103RD STREET  
MIAMI, FL 33150 US

## Name and Address of New Registered Agent:

INNOCENT, NATASHA  
891 NW 130TH AVE  
PEMBROKE PINES, FL 33028 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: NATASHA INNOCENT

08/30/2008

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:

Title: O ( ) Delete  
Name: BENJAMIN, PAUL A  
Address: PO BOX 245884  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: P ( ) Delete  
Name: BENJAMIN, PAUL A  
Address: PO BOX 245884  
City-St-Zip: PEMBROKE PINES, FL 33024

Title: VP ( ) Delete  
Name: MAXIS, JEAN K  
Address: 361 NW 103RD STREET  
City-St-Zip: MIAMI, FL 33150

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition  
Name: BENJAMIN, PAUL A  
Address: PO BOX 9246  
City-St-Zip: FORT MYERS, FL 33902 US

Title: P (X) Change ( ) Addition  
Name: BENJAMIN, PAUL A  
Address: PO BOX 9246  
City-St-Zip: FORT MYERS, FL 33902

Title: VP (X) Change ( ) Addition  
Name: INNOCENT, NATASHA  
Address: 891 NW 130TH AVE  
City-St-Zip: PEMBROKE PINES, FL 33028

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

08/30/2008

Electronic Signature of Signing Officer or Director

Date