

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000013244

FILED
Apr 26, 2007
Secretary of State

Entity Name: JRM HOME IMPROVEMENT, INC.

Current Principal Place of Business:

409 MANCHESTER ST.
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

409 MANCHESTER ST.
BOCA RATON, FL 33487

New Mailing Address:

FEI Number: 20-2708505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLDORF, HANS H
409 MANCHESTER ST.
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

HOLDORF, MARIA
409 MANCHESTER ST.
BOCA RATON, FL 33487 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: MARIA HOLDORF

04/26/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOLDORF, HANS H
Address: 409 MANCHESTER ST.
City-St-Zip: BOCA RATON, FL 33487

Title: SD () Delete
Name: HOLDORF, MARIA
Address: 409 MANCHESTER ST.
City-St-Zip: BOCA RATON, FL 33487

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: HOLDORF, MARIA
Address: 409 MANCHESTER ST.
City-St-Zip: BOCA RATON, FL 33487

Title: PD (X) Change () Addition
Name: HOLDORF, MARIA
Address: 409 MANCHESTER STREET
City-St-Zip: BOCA RATON, FL 33487

Title: SD () Change (X) Addition
Name: HOLDORF, HANS H
Address: 409 MANCHESTER STREET
City-St-Zip: BOCA RATON, FL 33487

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: MARIA HOLDORF

PD

04/26/2007

Electronic Signature of Signing Officer or Director

Date