

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000023655

FILED
May 31, 2007
Secretary of State

Entity Name: CENTURY HOME INSPECTIONS, INC.

Current Principal Place of Business:

20240 N.W .5 ST
PEMBROKE PINES, FL 33029

New Principal Place of Business:

Current Mailing Address:

20240 N.W. 5 ST
PEMBROKE PINES, FL 33029

New Mailing Address:

FEI Number: 05-0617404 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 N.W. 16TH STREET
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

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: _____

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: DPT () Delete
Name: MOLINA, NELSON T
Address: 700 N.W. 203RD TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DVP () Delete
Name: MOLINA, OLIVIA
Address: 700 N.W. 203RD TERRACE
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: MOLINA, NELSON T
Address: 20240 N.W .5 ST
City-St-Zip: PEMBROKE PINES, FL 33029

Title: DVP (X) Change () Addition
Name: MOLINA, OLIVIA
Address: 20240 N.W .5 ST
City-St-Zip: PEMBROKE PINES, FL 33029

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: NELSON T. MOLINA

_____ Electronic Signature of Signing Officer or Director

DPT

05/31/2007

_____ Date