

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000034541

FILED
Jul 17, 2006
Secretary of State

Entity Name: MEDALLION HOME IMPROVEMENTS, INC.

Current Principal Place of Business:

3 BISHOP LANE
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

3 BISHOP LANE
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 59-3799832

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE LELLO, ANTHONY
3 BISHOP LANE
PALM COAST, FL 32137 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

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: DE LELLO, ANTHONY
Address: 3 BISHOP LANE
City-St-Zip: PALM COAST, FL 32137

Title: VP/T () Delete
Name: DE LELLO, ANTHONY
Address: 3 BISHOP LANE
City-St-Zip: PALM COAST, FL 32137

Title: S () Delete
Name: DE LELLO, ANTHONY
Address: 3 BISHOP LANE
City-St-Zip: PALM COAST, FL 32137

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: SOLAZZO, THOMAS
Address: 3BISHOP LANE
City-St-Zip: PALM COAST, FL 32137 US

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: ANTHONY DELELLO

P

07/17/2006

Electronic Signature of Signing Officer or Director

Date