
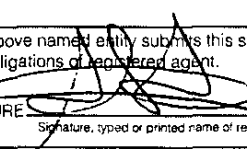
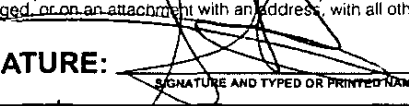


2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P05000067540 1. Entity Name FIVE STARS HOME SPECIALTY SERVICES INC					
Principal Place of Business 527 NW 45 AVE DEERFIELD BEACH, FL 33442				Mailing Address 527 NW 45 AVE DEERFIELD BEACH, FL 33442	
2. Principal Place of Business - No P.O. Box # 6430 W Sample Rd		3. Mailing Address 6430 W Sample Rd			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Coral Springs, FL		City & State Coral Springs, FL		4. FEI Number 20-2808829	
Zip 33067		Country USA		Applied For <input type="checkbox"/> Not Applicable	
Zip 33067		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CSG - CAPITAL SERVICES GROUP INC 822 SE 9TH ST PALM PLAZA DEERFIELD BEACH, FL 33441				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of, registered agent.					
SIGNATURE  <small>Signature, typed or printed name of registered agent and title if applicable.</small>		(NOTE: Registered Agent signature required when reinstating) DATE 01/30/08			
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS NUNES, ALEXANDRE S 3561 W HILLSBORO BLVD H-209 COCONUT CREEK, FL 33073	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPDT ARTUR OLIVEIRA, JOSE 527 NW 45 AVE DEERFIELD BEACH, FL 33442	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small> 01/30/08 <small>Daytime Phone #</small>					

FILED

08 FEB -4 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01302008 Chg-P CR2E034 (12/06)

From: Five Stars Home Specialty Services Inc.
Document # P05000067540
Alexandre S Nunes
6430 W Sample Rd
Coral Springs, FL 33067

To: Division of Corporation
Attn: Karen Saly / Reinstatement Section
P.O Box 6327
Tallahassee, FL 32314

January 31, 2008

Mrs. Karen,

According to our conversation per telephone on January 30, 2008, this letter is just to remind you of my case. I called you on January 30th and told you about how I was filing the reinstatement of my Corp. and when it came to the payment part, I went up to my room to get my Credit Card, and when I came back, my 4 year old son somehow typed some nonsense information on the Registered Agent Field, and on the President Signature field. You told me that I needed to fill the attached form, sign and send it to you with this letter to make you remember of my case. Please make the changes that I made on the attached form.

I would like to thank you for following up with this case. In the beginning when my son did this, I got really mad at him, but then after calling you the next day you laughed so much about it that I ended up finding it funny too. But what can I do, children will always be children, and that is something that I will remember forever. Hehehehehe!!!

If you have any questions in regards to this, please do not hesitate in contacting me at (561)809-2462.

Thank you,

Alexandre Nunes