## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000097510

**Entity Name:** HOME SOLUTIONS PRO INC.

FILED Apr 02, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6406 MERRILL ROAD, SUITE C G406 MERRILL RD SUITE C JACKSONVILLE, FL 32277 JACKSONVILLE, FL 32277

Current Mailing Address: New Mailing Address:

6406 MERRILL ROAD, SUITE C PO BOX 350822 JACKSONVILLE, FL 32277 JACKSONVILLE, FL 32235

FEI Number: 20-3135674 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HASSAN, NAJI 6406 MERRILL ROAD, SUITE C JACKSONVILLE, FL 32277 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:

Clastera is Circustrus of Devictors of August

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: PRSD (X) Change ( ) Addition

 Name:
 HASSAN, NAJI
 Name:
 HASSAN, NAJI

 Address:
 P.O. BOX 350822
 Address:
 P.O. BOX 350822

City-St-Zip: JACKSONVILLE, FL 322350822 City-St-Zip: JACKSONVILLE, FL 322350822

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: NAJI HASSAN PRSD 04/02/2006