

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000111648

Entity Name: HOME REPAIR SOLUTIONS, INC.

FILED  
Mar 31, 2008  
Secretary of State

## Current Principal Place of Business:

412 BETH DRIVE  
SANFORD, FL 32771 US

## New Principal Place of Business:

1380 VIBURNUM LANE  
WINTER PARK, FL 32792 US

## Current Mailing Address:

412 BETH DRIVE  
SANFORD, FL 32771 US

## New Mailing Address:

1380 VIBURNUM LANE  
WINTER PARK, FL 32792 US

FEI Number: 20-3288632

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COOPER, GARY D  
412 BETH DRIVE  
SANFORD, FL 32771 US

## Name and Address of New Registered Agent:

COOPER, GARY D  
1380 VIBURNUM LANE  
WINTER PARK, FL 32792 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: GARY D. COOPER

03/31/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: COOPER, GARY D  
Address: 412 BETH DRIVE  
City-St-Zip: SANFORD, FL 32771 US

Title: D ( ) Delete  
Name: COOPER, GARY D  
Address: 412 BETH DRIVE  
City-St-Zip: SANFORD, FL 32771 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: COOPER, GARY D  
Address: 1380 VIBURNUM LANE  
City-St-Zip: WINTER PARK, FL 32792 US

Title: MR. (X) Change ( ) Addition  
Name: COOPER, GARY D  
Address: 1380 VIBURNUM LANE  
City-St-Zip: WINTER PARK, FL 32792 US

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: GARY D. COOPER

PRES

03/31/2008

Electronic Signature of Signing Officer or Director

Date