2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000115915

Entity Name: COMPLETE RENOVATIONS, INC

FILED Jul 10, 2006 Secretary of State

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Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
SUITE 121	NETT DRIVE OD, FL 32750	US	114 WEST BAY AVE. LONGWOOD, FL 32750	US	
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
SUITE 121	NETT DRIVE OD, FL 32750	US	114 WEST BAY AVE. LONGWOOD, FL 32750	US	
FEI Number:	20-3383474	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
LONGWO	NGÉ CIRCLE OD, FL 32750	US ubmits this statement for the	purpose of changing its registered of	fice or registered agent. or both.	
	of Florida.				
SIGNATUF	RE:				
	Electroni	c Signature of Registered Ag	ent	Date	
		(2)(b), F.S., the corporation did nation ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () HERNANDEZ, EI 1696 GRANGE C LONGWOOD, FI	CIRCLE	Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	()	Delete	Title: VP () Name: CANALS, CARL Address: 846 WOODCRE City-St-Zip: LONGWOOD, F	ST COVE	

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: CARL S. CANALS VP 07/10/2006