2008 FOR PROFIT CORPORATION

Feb 04 2008 08:00 AN ate

ANNUAL REPORT					rep 04, 2000 00:00			
1. Entity Name	MENT # P0500013492 NE HOME SERVICE & REPAIR				,	Secretai	y of Sta	
Principal Place 1750 W 80 S HIALEAH, FL	STREET 1	ailing Address 1750 W 80 STREET HALEAH, FL 33014			11111 11111 11111 1111 1111 1111 1111 1111	81 11880 1391 Biolo 18130 III	184 STOLETO DE 1888	
DO NOT WRITE IN THIS SPACE			CE	01282008 No Chg-P CR2E034 (11/05) 4. FEI Number				
HERNAND 1750 W 80 HIALEAH,				NOT W				
	named entity submits this statement for the joins of registered agent. Signature, typed or printed name of registered agent and bite		ed office or registe			orida. I am familiar v	with, and accept	
		Election Campaign Finar Trust Fund Contribution	ncing \$5			8–8 0 031–02	0 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HERNANDEZ, MAYRA 1750 W 80 STREET HIALEAH, FL 33014	CIONS		-	NOT W			
TITLE NAME STREET ADDRESS								

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 of 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 of the receiver of 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 frachment with an address, with all other like empowered.

SIGNATURE

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OFFICER OR DIRECTOR