

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000008455

**FILED**  
**Apr 11, 2009**  
**Secretary of State**

**Entity Name:** DREAM JOBS BY HOME REPAIRS, INC

**Current Principal Place of Business:**

8145 VILLAGE GATE CT  
JACKSONVILLE, FL 32217

**New Principal Place of Business:**

**Current Mailing Address:**

8145 VILLAGE GATE CT  
JACKSONVILLE, FL 32217

**New Mailing Address:**

**FEI Number:** 20-4147825

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CANCAR, MEHO  
8145 VILLAGE GATE CT  
JACKSONVILLE, FL 32217 US

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

CANCAR, MEHO P  
8145 VILLAGE GATE CT  
JACKSONVILLE, FL 32217 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: CANCAR MEHO

04/11/2009

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MEHO, CANCAR  
Address: 8145 VILLAGE GATE CT  
City-St-Zip: JACKSONVILLE, FL 32245

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MEHO, CANCAR  
Address: 8145 VILLAGE GATE CT  
City-St-Zip: JACKSONVILLE, FL 32217

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: CANCAR MEHO

P

04/11/2009

Electronic Signature of Signing Officer or Director

Date