

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000082132

FILED  
Mar 31, 2009  
Secretary of State

Entity Name: PLATINUM QUALITY HOME SERVICES INC.

## Current Principal Place of Business:

21461 WINLOCK AVE  
PORT CHARLOTTE, FL 33952

## New Principal Place of Business:

23476 QUASAR BLVD  
PORT CHARLOTTE, FL 33980

## Current Mailing Address:

21461 WINLOCK AVE  
PORT CHARLOTTE, FL 33952

## New Mailing Address:

23476 QUASAR BLVD  
PORT CHARLOTTE, FL 33980

FEI Number: 20-5035500

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUILMETTE, BARRETT  
21461 WINLOCK AVE  
PORT CHARLOTTE, FL 33952 US

## Name and Address of New Registered Agent:

GUILMETTE, BARRETT  
23476 QUASAR BLVD  
PORT CHARLOTTE, FL 33980 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: BARRETT GUILMETTE

03/31/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D,P ( ) Delete  
Name: GUILMETTE, BARRETT  
Address: 21461 WINLOCK AVE  
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: VP ( ) Delete  
Name: DUNCAN, SHANE  
Address: 2184 ONONDAGA LN  
City-St-Zip: PUNTA GORDA, FL 33983

Title: S ( ) Delete  
Name: LEE, JONATHAN P  
Address: 1186 AMNESTY DR  
City-St-Zip: NORTH PORT, FL 34288

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D,P (X) Change ( ) Addition  
Name: GUILMETTE, BARRETT  
Address: 23476 QUASAR BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33980

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S (X) Change ( ) Addition  
Name: PERRI, KEVIN M  
Address: 432 VANNELL ST  
City-St-Zip: PORT CHARLOTTE, FL 33954

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: BARRETT GUILMETTE

P

03/31/2009

Electronic Signature of Signing Officer or Director

Date