

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000093160

FILED  
May 01, 2008  
Secretary of State

Entity Name: P.J. HANDYMAN REPAIR SERVICES, INC.

## Current Principal Place of Business:

19001 NW 45TH AVE  
OPA LOCKA, FL 33055

## New Principal Place of Business:

## Current Mailing Address:

19001 NW 45TH AVE  
OPA LOCKA, FL 33055

## New Mailing Address:

FEI Number: 20-5286434

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JEAN, PIERRE  
19001 NW 45TH AVE  
OPA LOCKA, FL 33055 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JEAN, PIERRE  
Address: 19001 NW 45TH AVE  
City-St-Zip: OPA LOCKA, FL 33055

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change ( ) Addition  
Name: OBAS, MARY-KOFF  
Address: 19001 NW 45TH AVE  
City-St-Zip: OPA LOCKA, FL 33055

Title: MGR ( ) Change (X) Addition  
Name: JEAN, PIERRE  
Address: 19001 NW 45TH AVE  
City-St-Zip: OPA LOCKA, FL 33025

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: MARY-KOFF OBAS

DIR

05/01/2008

Electronic Signature of Signing Officer or Director

Date