

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000094923

FILED
Apr 23, 2008
Secretary of State

Entity Name: HOME IMPROVEMENT MIAMI, INC.

Current Principal Place of Business:

216 CATALONIA AVE.
SUITE 110
CORAL GABLES, FL 33134

Current Mailing Address:

216 CATALONIA AVE.
SUITE 110
CORAL GABLES, FL 33134

New Principal Place of Business:

75 VALENCIA AVENUE
SUITE 700
CORAL GABLES, FL 33134

New Mailing Address:

75 VALENCIA AVENUE
SUITE 700
CORAL GABLES, FL 33134

FEI Number: 20-1566556

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAYAGO, TONY
216 CATALONIA AVE.
SUITE 110
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

SAYAGO, TONY
75 VALENCIA AVENUE
SUITE 700
CORAL GABLES, FL 33134 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:

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SAYAGO, TONY
Address: 216 CATALONIA AVE., SUITE 110
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD () Delete
Name: SAYAGO, TINA
Address: 216 CATALONIA AVE., SUITE 110
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SAYAGO, TONY
Address: 75 VALENCIA AVE., SUITE 700
City-St-Zip: CORAL GABLES, FL 33134

Title: VPD (X) Change () Addition
Name: SAYAGO, TINA
Address: 75 VALENCIA AVE., SUITE 700
City-St-Zip: CORAL GABLES, FL 33134

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: TINA SAYAGO

VPD

04/23/2008

Electronic Signature of Signing Officer or Director

Date