

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000105931

FILED
May 09, 2007
Secretary of State

Entity Name: INSPECTIONS UNLIMITED OF CENTRAL FLORIDA INC.

Current Principal Place of Business:

509 S CHICKASAW TRAIL
PMB 177
ORLANDO, FL 32825-785 US

New Principal Place of Business:

Current Mailing Address:

509 S. CHICKASAW TRAIL
PMB 177
ORLANDO, FL 32825-785 US

New Mailing Address:

FEI Number: 20-5361133

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTIAGO, GUILLERMO
1563 CRICKET CLUB CIRCLE
APT. 105
ORLANDO, FL 32828 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANTIAGO, GUILLERMO
Address: 509 S. CHICKASAW TRAIL PMB 177
City-St-Zip: ORLANDO, FL 32825-785 US

Title: VD () Delete
Name: GORDIAN, GLORIA E
Address: 509 S. CHICKASAW TRAIL, PMB 177
City-St-Zip: ORLANDO, FL 32825-785 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: GUILLERMO SANTIAGO

PD

05/09/2007

Electronic Signature of Signing Officer or Director

Date