2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000113934

FILED Apr 13, 2009 Secretary of State

Entity Name: PROPERTY INSPECTION SYSTEMS OF NE FLORIDA, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	HT BASIN DRI IVILLE, FL 322			
Current Mailing Address:		New Mailing Address:		
	HT BASIN DRI IVILLE, FL 322			
El Number	: 20-5509718	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
lame and	d Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
	JOHN HT BASIN DRI IVILLE, FL 322			
	e named entity : e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,
	e of Florida.	submits this statement for the	purpose of changing its register	ed office or registered agent, or both,
n the State	e of Florida. RE:	submits this statement for the		ed office or registered agent, or both, Date
n the State	e of Florida. RE: Electror			
n the State	e of Florida. RE: Electror	nic Signature of Registered Ag	ent	
n the State BIGNATUI Election Car DFFICER Title: lame: kddress:	e of Florida. RE: Electror mpaign Financing S AND DIREC	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete N ASIN DRIVE	ent	Date
n the State	e of Florida. RE: Electror mpaign Financin S AND DIREC PRES () ALONGE, JOHI 4842 YACHT B JACKSONVILLI	nic Signature of Registered Ag g Trust Fund Contribution (). TORS:) Delete N ASIN DRIVE E, FL 32225) Delete N ASIN DRIVE	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTORS

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: JOHN ALONGE PRES 04/13/2009