

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000054290

**FILED**  
**Mar 10, 2010**  
**Secretary of State**

**Entity Name:** SNOWS HOME RESTORATION, INC.

**Current Principal Place of Business:**

9305 PERTH RD  
LAKE WORTH, FL 33467

**New Principal Place of Business:**

**Current Mailing Address:**

9305 PERTH RD  
LAKE WORTH, FL 33467

**New Mailing Address:**

**FEI Number:** 59-3842254

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NIEVES, OSCAR  
9305 PERTH RD  
LAKE WORTH, FL 33467 US

**Name and Address of New Registered Agent:**

NIEVES, OSCAR CEO  
9305 PERTH RD  
LAKE WORTH, FL 33467 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:** OSCAR NIEVES

03/10/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** CEO  
**Name:** NIEVES, OSCAR  
**Address:** 9305 PERTH RD  
**City-St-Zip:** LAKE WORTH, FL 33467

**Title:** ASSI  
**Name:** NIEVES, NELLIE ASSI  
**Address:** 9305 PERTH RD  
**City-St-Zip:** LAKE WORTH, FL 33467

I hereby 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 all other like empowered.

**SIGNATURE:** OSCAR NIEVES

CEO

03/10/2010

Electronic Signature of Signing Officer or Director

Date