

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2008 8:00 am
Secretary of State

04-10-2008 90025 046 ***150.00

DOCUMENT # P07000065282

1. Entity Name
COMPREHENSIVE INSTALLATIONS, INC.



Principal Place of Business Mailing Address
155 44TH AVENUE **155 44TH AVENUE**
ST PETERSBURG BEACH, FL 33706 **ST PETERSBURG BEACH, FL 33706**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address
7901 SEMINOLE BLVD **SAME**

Suite, Apt. #, etc. Suite, Apt. #, etc.
1205

City & State City & State
SEMINOLE FL

Zip Country Zip Country
33772 **FLORIDA**

04032008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
26-0282224 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WALEGA, JOHN E JR.
155 44TH AVENUE
ST PETERSBURG BEACH, FL 33706

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
7901 SEMINOLE BLVD
1205
City **SEMINOLE** **FL** Zip Code **33772**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	WALEGA, JOHN E JR	
STREET ADDRESS	155 44TH AVENUE	
CITY - ST - ZIP	ST PETERSBURG BEACH, FL 33706	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	KING, JEREMY	
STREET ADDRESS	5020 6TH AVENUE N	
CITY - ST - ZIP	ST PETERSBURG, FL 33710	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	7901 SEMINOLE BLVD #1205	
STREET ADDRESS	SEMINOLE FL 33772	
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **JOHN WALEGA JR** 4/6/08 (727) 5659072
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #