## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000077511

Entity Name: A-1 CAPITAL HOME SOLUTIONS CORP

FILED May 13, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1601 N PALM AVE 702 NW 90 TERRACE

#106 PLANTATION, FL 33324 US

PEMBROKE PINES, FL 33026 US

**New Mailing Address: Current Mailing Address:** 

1601 N PALM AVE 702 NW 90 TERRACE

#106 PLANTATION, FL 33324 US PEMBROKE PINES, FL 33026 US

FEI Number: 26-0479489 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ARGUELLO, VIRGINIA ARGUELLO, VIRGINIA 1601 N PALM AVE 702 NW 90 TERRACE US PLANTATION, FL 33324

#106 PEMBROKE PINES, FL 33026 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: VIRGINIA ARGUELLO 05/13/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

ARGUELLO, VIRGINIA ARGUELLO, VIRGINIA Name: Name: 1601 N PALM AVE #106 Address: 702 NW 90 TERRACE Address: City-St-Zip: PEMBROKE PINES, FL 33026 US City-St-Zip: PLANTATION, FL 33324 US

Title: VΡ (X) Delete Title: () Change () Addition

ALTAMIRANO, NORLAN Name: Name: 1601 N PALM AVE #106 Address: Address: City-St-Zip: PEMBROKE PINES, FL 33026 US 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.

Ρ SIGNATURE: VIRGINIA ARGUELLO 05/13/2008