

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07000103982

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** STAVRO'S HOME SERVICES, INC.

**Current Principal Place of Business:**

7790 TOMMASI COURT  
NAPLES, FL 34114

**New Principal Place of Business:**

8161 XENIA LANE  
NAPLES, FL 34114

**Current Mailing Address:**

PO BOX 8628  
NAPLES, FL 34101

**New Mailing Address:**

**FEI Number:** 33-1183354

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GIARIMOUSTAS, STAVROS  
7790 TOMMASI COURT  
NAPLES, FL 34114 US

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

GIARIMOUSTAS, STAVROS  
8161 XENIA LANE  
NAPLES, FL 34114 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

04/29/2011

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: GIARIMOUSTAS, STAVROS  
Address: PO BOX 8628  
City-St-Zip: NAPLES, FL 34101

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: STAVROS GIARIMOUSTAS

PRES

04/29/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date