2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P07000129715

Name:

Address:

City-St-Zip:

LEMES, EDSON C

8964 SAN DUSQY AVE

JACKSONVILLE, FL 32216 US

Entity Name: ROGER HOME IMPROVEMENT SERVICES. CO

FILED Nov 26, 2008 Secretary of State

Littly Nan	ie. ROGER	HOIVIE	INFROVENIENT SERVI	CES, CC).		
Current Principal Place of Business:					New Principal Place of Business:		
	OUSQY AVE VILLE, FL 32	216	US				
Current Mailing Address:					New Mailing Address:		
	OUSQY AVE /ILLE, FL 32	216	US				
FEI Number:	20-1505189	FEII	Number Applied For()	FEI Nur	nber Not Appl	icable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:		
SHOCKMEDIA CORPORATION 9766 OLD ST AUGUSTINE RD 2					TAX DIRECT 1650 SAND LAKE RD 110		
JACKSONVILLE, FL 32257 US					ORLANDO, FL 32809 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: JOSE JARDIM JUNIOR					11/26/2008		
Electronic Signature of Registered Agent							Date
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P (REIS, ROGER 8964 SAN DUS JACKSONVILI	SQY AVE	Ē		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	S (BATISTA, EDV 8964 SAN DUS JACKSONVILL	SQY AVE	Ē		Title: Name: Address: City-St-Zip:		() Change () Addition
Title:	S () Delete			Title:	s	(X) Change () Addition

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.

Name:

Address:

City-St-Zip:

MOURA, ADALBERTO

8964 SAN DUSQY AVE

JACKSONVILLE, FL 32216 US

SIGNATURE: ROGERIO REIS P 11/26/2008