2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000059081

Entity Name: MARIPOSA HOME SOLUTIONS CORPORATION

FILED Apr 03, 2009 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

6760 SW 24TH STREET 6791 SW 16TH STREET SUITE 101 MIAMI, FL 33155 US MIAMI, FL 33155 US

Current Mailing Address: New Mailing Address:

6760 SW 24TH STREET 6791 SW 16TH STREET SUITE 101 MIAMI, FL 33155 US MIAMI, FL 33155 US

FEI Number: 26-2821866 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MARTINEZ, IRINA
6760 SW 24TH STREET
SUITE 101
MIAMI, FL 33155 US

MARTINEZ, IRINA
6791 SW 16TH STREET
MIAMI, FL 33155 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: IRINA MARTINEZ 04/03/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

Name:MARTINEZ, IRINAName:MARTINEZ, IRINAAddress:6760 SW 24TH STREET, SUITE 101Address:6791 SW 16TH STREET

City-St-Zip: MIAMI, FL 33155 US City-St-Zip: MIAMI, FL 33155 US

Title: SEC () Delete Title: SEC (X) Change () Addition Name: MARTINEZ, IRINA Name: MARTINEZ, IRINA

 Name:
 MARTINEZ, IRINA

 Address:
 6760 SW 24TH STREET, SUITE 101
 Address:
 6791 SW 16TH STREET

 City-St-Zip:
 MIAMI, FL 33155 US
 City-St-Zip:
 MIAMI, FL 33155 US

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

 Name:
 MARTINEZ, IRINA
 Name:
 MARTINEZ, IRINA

 Address:
 6760 SW 24TH STREET, SUITE 101
 Address:
 6791 SW 16TH STREET

 City-St-Zip:
 MIAMI, FL 33155 US
 City-St-Zip:
 MIAMI, FL 33155 US

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.

SIGNATURE: IRINA MARTINEZ PRES 04/03/2009