2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2011
Secretary of State

DOCUMENT# P09000023212

Entity Name: FULL HOUSE CONTRACTING AND REMODELING, INC.

Current Principal Place of Business:

6919 W BROWARD BLVD. #267
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

6919 W BROWARD BLVD. #267
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 26-4485212 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARTIN, LEE
6919 W BROWARD BLVD. #267
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

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 — Date

OFFICERS AND DIRECTORS:

Title: D
Name: MARTIN, LEE
Address: 6919 W BROWARD BLVD. #267
City-St-Zip: PLANTATION, FL 33317

Title: D
Name: MARTIN, HEATHER
Address: 6919 W BROWARD BLVD. #267
City-St-Zip: PLANTATION, FL 33317

Title: D
Name: LEIMAN, BRYAN
Address: 6919 W BROWARD BLVD. #267
City-St-Zip: PLANTATION, FL 33317

Title: D
Name: LEIMAN, BECKY
Address: 6919 W BROWARD BLVD. #267
City-St-Zip: PLANTATION, FL 33317

Title: S
Name: LEIMAN, LARRY
Address: 6919 W BROWARD BLVD. #267
City-St-Zip: PLANTATION, FL 33317

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: BRYAN LEIMAN D 04/20/2011

Electronic Signature of Signing Officer or Director — Date