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Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90037 001 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000025723

1. Corporation Name
INSPECT-A-HOME, INC.



Principal Place of Business
10034 SW 221ST STREET
MIAMI FL 33190

Mailing Address
10034 SW 221ST STREET
MIAMI FL 33190

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 14625 SW 81 AVE.

Suite, Apt. #, etc.

22

City & State

23 MIAMI, FL

Zip

24 33158

Country

25 USA

2a. Mailing Address

26 14625 SW 81 AVE.

Suite, Apt. #, etc.

27

City & State

28 MIAMI, FL

Zip

29 33158

Country

30 USA

3. Date Incorporated or Qualified

04/04/1994

4. FEI Number

65-0495885

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

CARTER, JAMES A III
10034 SW 221ST STREET
MIAMI FL 33190

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

14625 SW 81 AVE.

83

84 City

MIAMI

FL

85 Zip Code

33158

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Signature, typed or printed name of individual and title if applicable.

Signature, typed or printed name of individual and title if applicable.

DATE

1/4/99

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D CARTER, JAMES A III

STREET ADDRESS 10034 SW 221ST STREET

CITY-ST-ZIP MIAMI FL 33190

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.