## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMEN

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000053377 (3)

HOME RENOVATION SERVICES INC.

Principal Place of Business
3100 N 72 WAY
HOLLYWOOD FL 33024

Mailing Address

3100 N 72 WAY

## FILED Jan 26 1998 8:00am Secretary of State



1022111000 12 00024		DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualified	- "
			06/20/1996	
2. Principal Place of Business	2a. Mailing Address	, _ v \ \	4. FEI Number	Applied For
Suite, Apt. #, etc.	26 46/1 S. U.S.	Wersity DR.	65-0689174	Not Applicable
22	27 Su 1725	119	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State	<del>''    </del>	6. Election Campaign Financing	
23	26 46/1 5 Un Suite, Apt. #, etc. 27 Suite, Apt. #, etc. City & State 28 DAUIE	FL	Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip   Country	Zip	Country	8. This corporation owes or has paid the cu	
24 25	29 33328 3	o USA	Personal Property Tax due June 30.	☐ Yes ☐ No
9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered	Agent
CARICO, DONNA		81 Name		
3100 NORTH 72 WAY		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
HOLLYWOOD FL 33024				
		83		
		84 City	FI	85 Zip Code
11. Pursuant to the provisions of Sections 607.0	502 and 607.1508, Florida Statutes	the above-named corpo		
<ol> <li>Pursuant to the provisions of Sections 607.0: office or registered agent, or both, in the Sta agent. I am familiar with, and accept the obl</li> </ol>	te of Florida. Such change was au igations of, Section 607.0505, Flori	thorized by the corporation da Statutes.	on's board of directors. I hereby accept the ap	pointment as registered
SIGNATURE				<u> </u>
Signature, typed or printed name of registered at 12. OFFICERS A	ND DIRECTORS	Registered Agent signature required 13.	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE PD	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME OH, TAEHO		1.2 NAME		
STREET ADDRESS 3100 NORTH 72 WAY		1.3 STREET ADDRESS		
CITY-SI-ZIP HOLLYWOOD FL 33024		1.4 City-ST-ZIP		
TITLE VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME CARICO, DANNY	_	2.2 NAME		
STREET ADDRESS 3100 NORTH 72 WAY		2.3 STREET ADDRESS		
CITY-ST-ZIP HOLLYWOOD FL 33024		2, 4 CITY - ST - ZIP		
TITLE STD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME CARICO, DONNA		. 3.2 NAME		
STREET ADDRESS 3100 NORTH 72 WAY		3.3 STREET ADDRESS		
CITY-ST-ZIP HOLLYWOOD FL 33024		3.4. CITY-ST-ZIP		
TITLE	DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6,1 TITLE		Change Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY - ST - ZIP		

4. 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.

SIGNATURE:

OanGN CEURE REGUIRELLE

98 195

(954) 986-175