

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000004684

FILED
Jan 17, 2006
Secretary of State

Entity Name: OSMIR HOME INVESTMENTS, INC.

Current Principal Place of Business:

14161 LEANING PINE DR.
MIAMI LAKES, FL 33014

New Principal Place of Business:

7880 W 20 AVE
28
HIALEAH, FL 33016

Current Mailing Address:

14161 LEANING PINE DR.
MIAMI LAKES, FL 33014

New Mailing Address:

7880 W 20 AVE
28
HIALEAH, FL 33016

FEI Number: 65-0855197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUNOZ, JUAN O
14161 LEANING PINE DR.
MIAMI LAKES, FL 33014 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MUNOZ, JUAN O
Address: 14161 LEANING PINE DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: SD () Delete
Name: MUNOZ, MARGARITA W
Address: 14161 LEANING PINE DR
City-St-Zip: MIAMI LAKES, FL 33074

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JUAN O. MUNOZ

PD

01/17/2006

Electronic Signature of Signing Officer or Director

Date