2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000074107

Title:

Name: Address:

City-St-Zip:

FILED Apr 30, 2007 Secretary of State

Entity Nan	ne: HOMERE	STORATION, INC.					
Current Principal Place of Business:			New Principal Place of Business:				
3126 57 AV ST PETER	/E N SBURG, FL 33	714					
Current Mailing Address:			New Mailing Address:				
3126 57 AV ST PETER	/E N SBURG, FL 33	3714					
FEI Number: 59-3542801 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired ()			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
CLARK, DI 3126 57 AV SAINT PET		. 33714 US					
The above in the State		ubmits this statement for the po	urpose of changing i	ts registered of	fice or registered ag	gent, or both,	
SIGNATUR							
Flanting Com		Signature of Registered Age	nt	Date			
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () I CLARK, HOWAR 3126 57 AVE N ST PETERSBUR		Title: Name: Address: City-St-Zip:	PD (X) CLARK, JAMES 3126 57 AVE N ST PETERSBUR	Change () Addition		
Title: Name: Address: City-St-Zip:	VP () I CLARK, JAMES 3126 57 AVE N ST PETERSBUR	Delete G, FL 33714	Title: Name: Address: City-St-Zip:	S (X) CLARK, HOWAR 3126 57 AVE N ST PETERSBUR			
Title: Name: Address: City-St-Zip:	VP () I CLARK, DIANE 3126 57 AVE N ST PETERSBUR	Delete G, FL 33714	Title: Name: Address: City-St-Zip:	TR (X) CLARK, DIANE 3126 57 AVE N ST PETERSBUR	Change () Addition		

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 an an enterphase with an eddress with all other like empowered. above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JAMES CLARK Ρ 04/30/2007

() Delete

ST PETERSBURG, FL 33714

BLAIR, BRIAN

3126 57 AVE N

() Change () Addition