

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000075536

Entity Name: HOME ELEGANCE, INC.

FILED  
Apr 23, 2006  
Secretary of State

**Current Principal Place of Business:**

4500 W. OAKLAND PARK BLVD.  
SUITE 102  
LAUDERDALE LAKES, FL 33313

**New Principal Place of Business:**

**Current Mailing Address:**

4500 W. OAKLAND PARK BLVD.  
SUITE 102  
LAUDERDALE LAKES, FL 33313

**New Mailing Address:**

FEI Number: 65-0963088      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPENCER, SHERNA ESQ  
5950 W. OAKLAND PARK BLVD., STE 103  
LAUDERHILL, FL 33313 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: D ( ) Delete  
Name: CRANSTON, DAHLIA  
Address: 5950 W. OAKLAND PARK BLVD. SUITE 103  
City-St-Zip: LAUDERHILL, FL 33313

Title: T ( ) Delete  
Name: WAITE, DONOVAN  
Address: 21325 NW 8TH PLACE  
City-St-Zip: NORTH MIAMI BEACH, FL 33179

Title: S ( ) Delete  
Name: NUGENT, OSWALD  
Address: 2517 WALLACE AVENUE  
City-St-Zip: BRONX, NY 10467

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: DAHLIA CRANSTON

D

04/23/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date