

2001 UNIFORM BUSINESS REPORT (UBR)

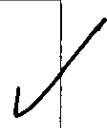
FILED
May 30, 2001 8:00 am
Secretary of State

05-30-2001 90030 029 ***150.00

DOCUMENT # P99000088968

1. Entity Name

PERSONALIZED HOME SERVICES, INC.



Principal Place of Business

Mailing Address

**7441 SW 172ND STREET
 MIAMI FL 33157**

**7441 SW 172ND STREET
 MIAMI FL 33157**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0952686**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

**TEMPLE, CRAIG H
 7441 SW 172ND STREET
 MIAMI FL 33157**

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent designation required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
 (See criteria on back)



FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001, Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|----------------|-----------------------------|---------------------------------|
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | TEMPLE, CRAIG H | |
| STREET ADDRESS | 7441 SW 172ND STREET | |
| CITY-ST-ZIP | MIAMI FL 33157 | |
| TITLE | | <input type="checkbox"/> Delete |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Delete |
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| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Handwritten signatures and dates:
 Craig H Temple - President 5/31/01
 [Signature] 5/31/01