

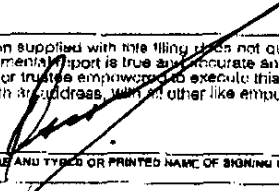
FROM :ABELAIRAS

FAX NO. :7864971900

FILED
Jan 16, 2008 8:00 am
Secretary of State

01-16-2008 90021 032 ***150.00

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P99000105896 1. Entity Name HOME INSPECTOR & CONTRACTOR, INC.			
Principal Place of Business 10134 SW 2ND TERRACE MIAMI, FL 33174		Mailing Address 10134 S.W. 2ND TERRACE MIAMI, FL 33174	
DO NOT WRITE IN THIS SPACE			
8. Name and Address of Current Registered Agent GARCIA, OSCAR C 10134 S.W. 2ND TERRACE MIAMI, FL 33174		DO NOT WRITE IN THIS SPACE	
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. I am familiar with, and accept, the obligations of registered agent.			
SIGNATURE: _____ (Signature, by officer or director of registered agent and title if applicable) (NOTE: Registered Agent signature required when re-issuing) DATE: _____			
FILE NOW! FEE IS \$150.00 After May 1, 2008 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST GARCIA, OSCAR C 10134 S.W. 2ND TERRACE MIAMI, FL 33174		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if divulged, or on an attachment with an address, with or other like empowered.		
SIGNATURE: (X)  OSCAR GARCIA 1/7/08 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			