


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 07, 2004 08:00 AM
Secretary of State

DOCUMENT # V27395 1. Entity Name AFFORDABLE HOME REMODELING, INC.	
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Principal Place of Business 8275 SW 4TH ST MIAMI, FL 33144 US	Mailing Address PO BOX 640937 MIAMI, FL 33164 US
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05052004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0805235	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MEDEROS, ALEXIS 8275 SW 4TH STREET MIAMI, FL 33144

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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 _____ <small>(print or type typed or printed name of registered agent and file if applicable)</small>	(NOTE: Registered Agent signature required when reappointing)	DA # _____
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FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice
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10. OFFICERS AND DIRECTORS	
NAME TITLE STREET ADDRESS CITY AND STATE	PS MEDEROS, ALEXIS 8275 SW 4TH STREET MIAMI, FL 33144
NAME TITLE STREET ADDRESS CITY AND STATE	D ARGUELLES, ALEJANDRO 167 N.E. 167TH ST. MIAMI, FL 33162
NAME TITLE STREET ADDRESS CITY AND STATE	
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NAME TITLE STREET ADDRESS CITY AND STATE	

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05/07/04-80005-024 150.00

DO NOT WRITE IN THIS SPACE

12. I, the undersigned, 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 contained in 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 of this report or in an attachment, with an address, with all other like empowered

SIGNATURE: _____ <small>(print or type typed or printed name of signing officer or director)</small>	Date: 5/4/04	3056532048
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