### I hereby 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 all other like empowered.

Ρ

#### SIGNATURE: PAMELA SMITH

Electronic Signature of Signing Officer/Director Detail

SMITH, PAMELA 16281 76 ST N LOXAHATCHEE, FL 33470 US

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:

**Officer/Director Detail :** Title VP Title Ρ Name SMITH, PAMELA Name **GRIFFIN, ADRIAN 157 CYPRESS TRACE** Address 16281 76 ST N Address City-State-Zip: ROYAL PALM BEACH FL 33411

# 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000063391

Entity Name: ESTATE HOME WATCH INCORPORATED

#### **Current Principal Place of Business:**

16281 76 ST N LOXAHATCHEE, FL 33470

#### **Current Mailing Address:**

16281 76 ST N LOXAHATCHEE. FL 33470

#### FEI Number: 27-0633779

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

City-State-Zip: LOXAHATCHEE FL 33470

Date

CC7229402849

FILED Jan 23, 2014

Secretary of State

Certificate of Status Desired: No

01/23/2014 Date