

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90044 046 ***150.00

813555



DO NOT WRITE IN THIS SPACE

DOCUMENT # 388175

1. Entity Name

THE HOUSE OF INTERNATIONAL REALTY, INC.

Principal Place of Business 11543 N KENDALL DRIVE FL 33176	Mailing Address 11543 N KENDALL DRIVE MIAMI FL 33176-1002
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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 59-1364859	Applied For <input type="checkbox"/>
	Not Applicable <input type="checkbox"/>

5. Certificate of Status Desired **\$8.75 Additional Fee Required.**

6. Name and Address of Current Registered Agent

**LUCK, RICHARD S.
11543 N KENDALL DR
MIAMI FL 33176**

7. Name and Address of New Registered Agent

Name _____

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

City **FL** Zip Code _____

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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, 2000 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	
TITLE DP	<input type="checkbox"/> Delete
NAME LUCK, RICHARD S	
STREET ADDRESS 11543 N. KENDALL DRIVE	
CITY-ST-ZIP MIAMI FL 33176	
TITLE DV	<input type="checkbox"/> Delete
NAME LUCK, MARTIN A	
STREET ADDRESS 11543 N. KENDALL DRIVE	
CITY-ST-ZIP MIAMI FL 33176	
TITLE S	<input type="checkbox"/> Delete
NAME LUCK, JUANITA I	
STREET ADDRESS 11543 N. KENDALL DRIVE	
CITY-ST-ZIP MIAMI FL 33176	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

CRZE034 (9/99)

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.

SIGNATURE:
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
RICHARD S. LUCK

Date: **2-16-00** Daytime Phone #: **305-271-4444**