

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F78311 (0)
1. Corporation Name
LANDSTAR HOMES, INC.

Principal Place of Business
550 BILTMORE WAY 1110
CORAL GABLES FL 33134
US

Mailing Address
550 BILTMORE WAY 1110
CORAL GABLES FL 33134-5730
US



3. Date Incorporated or Qualified 04/28/1982
3a. Date of Last Report 04/27/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-2188904	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
Zip	Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
24	29		
Country	Country		
25	30		

9. Name and Address of Current Registered Agent

WEISENFELD, JOSEPH J.
799 BRICKELL PLAZA
SUITE 900
MIAMI FL 33131

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
FL
85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STERN, RODOLFO	1.2 NAME	
STREET ADDRESS	550 BILTMORE WAY #1110	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	1.4 CITY-ST-ZIP	
TITLE	VSD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORWITZ, ROBERTO (EX)	2.2 NAME	
STREET ADDRESS	550 BILTMORE WAY #1110	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SERVIANSKY, DAVID (EX)	3.2 NAME	
STREET ADDRESS	550 BILTMORE WAY #1110	3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	3.4 CITY-ST-ZIP	
TITLE	DV	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ECKSTEIN, BERNARD	4.2 NAME	
STREET ADDRESS	550 BILTMORE WAY #1110	4.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	4.4 CITY-ST-ZIP	
TITLE	VD	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STERN, EDUARDO (EX)	5.2 NAME	
STREET ADDRESS	550 BILTMORE WAY, #1110	5.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALMISICIANO, CARL	6.2 NAME	
STREET ADDRESS	120 FAIRWAY WOODS BLVD.	6.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32824-9026	6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 individual or institution empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if change of registered agent or address is indicated.

CR2E034 (9/96)