May 10, 1999 8:00 am Secretary of State

05-10-1999 90033 026 \*\*\*150.00

Mailing Address

2450 HOLLYWOOD BLVD



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **G70690**

1. Corporation Name

Principal Place of Business 2450 HOLLYWOOD BLVD

HOMEBUILDER MARKET INDEX SYSTEMS, INC.

#701	1 22020	#701 HOLLWOOD FL 33020		DO NOT WRITE IN THIS SE	PACE
/ HOLLYWOOD FL 33020		US		3. Date Incorporated or Qualifed	
1				11/18/1983	
2 Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
<b>⊢</b> ¬ ′	acc of Eddinsoo	26		59-2351489	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.			\$8.75 Additional
22	m, 010.	27		5. Certifcate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intang	nible
24	25	29 30	]		Yes □No
24	9. Name and Address of Current			10. Name and Address of New Registered Ag	ent
	<u> </u>		81 Name		
SABI	in, donald				
2450 HOLLYWOOD BLVD			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
SUIT	E 701		83		
_	LYWOOD FL 33020		[5]		
,,,,,			84 City	FL	85 Zip Code
				· · · · · · · · · · · · · · · · · · ·	- naina ita sasiatarad
office or n	to the provisions of Sections 607.0502 egistered agent, or both, in the State om familiar with, and accept the obligat	of Florida. Such change was autho	orized by the corporation	oration submits this statement for the purpose of chon's board of directors. I hereby accept the appointm	nent as registered
SIGNATURE	· -				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Reg	istered Agent signature require		
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AND I	
TITLE	PTD	☐ DELETE	1.1 TITLE	. L	Change Addition
NAME	Sabin, Donald		1.2 NAME		
STREET ADDRESS	1255 VAN BUREN STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP		
TITLE	SDV	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SABIN, JANN		2.2 NAME		
STREET ADDRESS	1255 VAN BUREN ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL		2.4 CITY-ST-ZIP	the state of	الصيدا
TITLE	11022111000112	☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
i l			3.3 STREET ADDRESS		
STREET ADDRESS					
CITY-ST-ZIP		☐ DELETÉ	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
TITLE	<u>.</u>	□ vetete		L	
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		Thomas T Addition
TITLE		☐ DELETÉ	5.1 TITLE	Ĺ	Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		=
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

his films does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in

SIGNATURE:

14. I hereby certify that the information supplied with this indicated on this annual report or supplemental annual officer or director of the corporation or the read Block 12 or Block 13 if changed, or on an attac

REQUIRED