

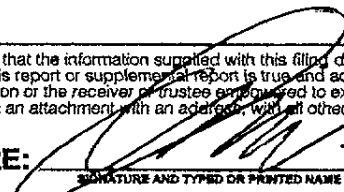


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 13, 2006 08:00 AM
Secretary of State

DOCUMENT # G93395 1. Entity Name HOLMES BUILDERS, INC.			
Principal Place of Business 980 N.W. NORTH RIVER DRIVE NO. 139 MIAMI, FL 33136		Mailing Address 980 N.W. NORTH RIVER DRIVE NO. 139 MIAMI, FL 33136	
DO NOT WRITE IN THIS SPACE			
		01102006 No Chg-P CR2E034 (11/05)	
		4. FEI Number 59-2507160	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
8. Name and Address of Current Registered Agent CURRAN, CHARLES A 106 TALLAHASSEE STREET CARRABELLE, FL 32322		DO NOT WRITE IN THIS SPACE	
9. 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>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP HOLMES, THOMAS 980 N.W. NORTH RIVER DR MIAMI, FL		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS KISIELEWSKI, JOHN P 980 NW NORTH RIVER DR. #132 MIAMI, FL 33136		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
DO NOT WRITE IN THIS SPACE			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		Thomas Holmes 1-10-06 305-325-8734	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	