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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

J99632

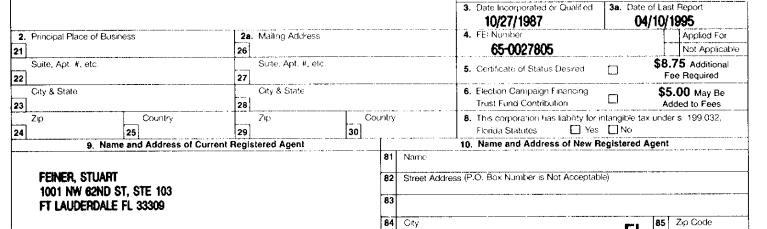
(8)

FLHOMES, INC.

Principal Place of Business

Mailing Address

1001 NW 62ND ST. STE 103 FT LAUDERDALE FL 33309 1001 NW 62ND ST. STE 103 FT LAUDERDALE FL 33309



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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.

(SETHIBAL WILL	1, and accept the obligations of, section corre	icoc, Florida Diatutes.				
SIGNATURE Space spector problem have of negligible and the displace of the Unit Englished Agent signed A negligible intensiving DATE.						
12.	. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	□ DELETÉ	L 1 TIT, F		Change	Addition
NAME	FEINER, STUART		1.2 NAME			
STREET ADDRESS	1001 NW 62ND ST, STE 103		1.3 STREET ADDRESS			
CITY-ST-ZIF	FT LAUDERDALE FL		1.4 C(FY - ST - Z)P			
TITLE		DELETE	2 1 TIFLE		Change	☐ Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
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NAME			3.2 NAMe			
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TITLE		DELETE	4 1 TITLE		Change	Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - 719			4.4 CITY+ST-ZIP			
THLE		DELETE	5 1 TITLE		Change	Add:tion
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
017Y - ST - ZIP			5.4 CITY - ST - ZIP			
Trite		DELETE	6 1 TITLE		Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	1 2		6.4 C((Y+S1+2)P			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statutes. I further certify that the information indicated on the 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 directly of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if triangle or on an attachment with an address

SIGNATURE:

Stuart B. Feiner SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

.4/30/96

(954) .772-9800

CR2E034 (12/95)