FILED SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). Jul 29 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (6)HOME BUYER'S BROKER, INC. Principal Place of Business Mailing Address 9990 S.W. 77TH AVE #208 7272 SOUTHWEST 132ND STREET **SUITE 217** MIAMI FL 33156 DO NOT WRITE IN THIS SPACE MIAMI FL 33156-2680 US 3. Date Incorporated or Qualified 01/05/1990 2a. Malling Address 26 7272 4. FEI Number Applied For 2. Principal Place of Business Sw 132 St. 65-0163475 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 6. Election Campaign Financing \$5.00 May Be recre Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No USA Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MORTON, GREG ton, brea 7272 S.W. 132ND ST 82 MIAMI FL FL 33156 507.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered indea. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of, section 607.0505, Florida Statutes. Pursuant to the provision agent. I am familiar **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE DELETE MORTON, GREG 1.2 NAME NAME 7272 S.W. 132ND STREET 13 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE Change DELETE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1.TITLE TITLE DELETE Change Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF TITLE 5.1 TITLE Change __ DELETE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIF 5.4 CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CiTY-ST-ZIP

14. 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 annual report or supplemental annual report is true and section at 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 fectiver or trustage employered to execute this report as required by Chapter 607, Florida Statutes; and that my same appears in Block 12 or Block 13 if changed, or op an attachment with an additional section.

CITY-ST-ZIP

SIGNATURE: