Applied For

Not Applicable

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90102 001 ***150.00

DOCUMENT	#	I 40	14 0	1
1. Corporation Name		~		•

HOME BUYER'S BROKER, INC.

Principal Place of Business

2. Principal Place of Business

Same

21

7272 SW 132ND ST PINECREST FL 33156 Mailing Address

7272 SW 132ND ST PINECREST FL 33156

2a. Mailing Address

same

26

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

01/05/1990

65-0163475

4. FEI Number

Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	□ \$8.75 / Fee Re	
City & Stat	te	City & State			6. Election Campaign Financin	g \$5.00	May Be
23		28	0		Trust Fund Contribution	Added 1	to Fees
Zip 24	Country 25	Zip 30	Country		This corporation owes the corporation Property Tax.	urrent year Intangible	\
	9. Name and Address of Current	Registered Agent			10. Name and Address of Nev	v Registered Agent	
MORTON, GREG 7272 SW 132ND ST			81	Name	/D.O. D. M. Harris N. (A.		
			82 Street Address (P.O. Box Number is Not Acceptable)				
PINECREST FL 33156			83				
			84	City		FL 85 Zip 6	Code
11 Dureuant	to the provisions of Sections 607.0502	and 607 1508 Florida Statutas	the above	named cor	poration submits this statement for the	<u></u>	registered
office or r	egistered agent, or both, in the State of	f Florida. Such change was auth	orized by t	he corporat	ion's board of directors. I hereby acc	cept the appointment as re	gistered
	m amiliar with, and accept the obligation	ons of, Section 607.0505, Florida	Statutes.			4122/00	
SIGNATURE	Signature, typed or printed frame of registered agent	<i>b</i>				4/08/47	<u> </u>
12.	Signature, typed or printed name of registered agent		13.	signature requir	ed when reinstating) ADDITIONS/CHANGES TO C	DESICERS AND DIRECTO	NDS IN 12
TITLE	D OFFICERS AND	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO C	☐ Change	Addition
	MORTON, GREG	_ beere			none	Ontarigo	[_] / kdokdom
NAME	7272 S.W. 132ND STREET		1.2 NAME	'			
STREET ADDRESS		į	1.3 STREET	I			
CITY-ST-ZIP	PINECREST FL 33156	☐ DELETE	1.4 CITY-ST	-ZIP		[] Change	☐ Addition
TITLE		□ ntreie	2.1 TITLE			☐ Change	Addition
NAME			2.2 NAME				1
STREET ADORESS			2.3 STREET	ADDRESS			
CITY-ST-ZIP			2.4 CITY-\$1	r-ZIP			
TITLE		☐ DELETE	3.1 TITLE		• *	☐ Change	Addition .
NAME			3.2 NAME				ļ
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S1	-ZIP			
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP	*		4.4 CITY-ST	ZIP			
TITLE	·	☐ DELETÉ	5.1 TITLE			☐ Change	☐ Addition
NAME	-		5.2 NAME				
STREET ADDRESS			5.3 STREET.	ADDRESS			.]
Cffy-St-Zip			5.4 CITY-ST	ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET.	ADDRESS			Ì
CITY-ST-ZIP	1		6.4 CITY-ST-	-ZIP			
	portify that the information expedied with	Aleja Elija alaan mada aasili saa ala	a augmentic		Section 110 07/2\/i\ Elerida Statuta	I. C. Alban, and C. Alban, Mar. S.	

as above

I nereby ceruly 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.