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**

DOCUMENT # M81727

1. Corporation Name

H & M CUSTOM HOMES, INC.

Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90021 036 ***150.00



Principal Place	of Business	Mailing Address					4120 2120 4	21211 1991	
•	ST 26TH AVENUE	4410 NORTHEAST 26TH AV	410 NORTHEAST 26TH AVENUE IGHTHOUSE POINT FL 33064			DO NOT WRITE IN THIS	SPACE		
						3. Date Incorporated or Qualifed	SPACE		ĺ
		•				05/19/1988			
2 Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	Ap	plied For	
21	abb 07 Bab639	26				65-0055219	No	t Applicable '	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				5Certifcate of Status Desired	\$8.75 A		_
22	***************************************	27				5Certificate of Status Desired	Fee Re	quired	
City & State		City & State				6. Election Campaign Financing	\$5.00	•	
23	· ·	28				Trust Fund Contribution	Added t	o Fees	
Zίρ	Country	Zip	Cour	ntry		8. This corporation owes the current year Int		□No	
24	25		30			Personal Property Tax. 10. Name and Address of New Registered			
*****	9. Name and Address of Current	registered Agent		81	Name	10. Hallis and Address of Heat Gegleteren	· ·goint		
MAS	SEY, EVAN, JR.								
	N.E. 28TH AVENUE			82	Street Addres	ss (P.O. Box Number is Not Acceptable)			
LIGH	THOUSE POINT FL 33064		}	83	<u>.</u>				1
							" a = 1 = 1 - 2	<u></u>	
				84	City	FL	85 Zip C	code	
11 Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statute	s, the ab	oove	-named corpor	ration submits this statement for the purpose of	changing its	registered	
office or re	egistered agent, or both, in the State on familiar with, and accept the obligati	t Florida. Such change was au	tnonzea	DV I	ne corporation	's board of directors. I hereby accept the appoint	intment as req	gistered	
	n familiar with, and accept the obligati	ons of, aection oor.oood, more	ua olali	nco.					
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered	Agent	signature required v	when reinstating) DATE			1
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	DPT	☐ DELETE	1,1 TIT	LE			☐ Change	☐ Addition	:
NAME	HART, STEVEN		1.2 NA	ME.					
STREET ADDRESS	4410 NE 26TH AVE		1.3 ST	REET.	ADDRESS				į
CITY-ST-ZIP	LIGHTHOUSE POINT FL		_	1.4 CITY-ST-ZIP		to the same of the	Change	☐ Addition	H
TITLE	DVS DELETE			2.1 TITLE			Change	Addition	
NAME	MASSEY, EVAN, JR.		2.2 NA						İ
STREET ADDRESS	4410 NE 26TH AVE.			2.3 STREET ADDRESS					
CITY-ST-ZIP	LIGHTHOUSE POINT FL			2.4 CITY-ST-ZIP			[] Change	Addition	. =
TITLE	· · ·			3.1 TITLE 3.2 NAME					
NAME				3.3 STREET ADDRESS					ł
STREET ADDRESS			1	3.4. CITY+ST-ZIP					
CITY-ST-ZIP TITLE	, , ,	DELETE	4.1 TIT		1-71L		☐ Change	Addition	1
NAME		<u> </u>	4. 2 N						
STREET ADDRESS			•		ADDRESS				
CITY-ST-ZIP	• .		4.4 CI						
TITLE		☐ DELETE	5.1 TIT				Change	☐ Addition	ľ
NAME .			5.2 NA	ME					ĺ
STREET ADDRESS			5.3 ST	REET	ADDRESS				ļ
CITY-ST-ZIP			5.4 Cf		-ZIP				
TITLE		- DELETE	6.1 TII	ILE			☐ Change	☐ Addition	
NAME .	į		6.2 NA	ME					
STREET ADDRESS	•				ADDRESS				
CITY-ST-ZIP	_		6.4 CI	ry.st	r-ZIP]

14. I hereby certify that the information supplied with his 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 suppliemental 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 poster 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 a attachment with an attachment with all other like empowered.

SIGNATURE:

CITY-ST-ZIP