

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000001103

FILED
Jun 15, 2004
Secretary of State

Entity Name: HOME CENTER INTERNATIONAL CORP.

Current Principal Place of Business:

16921 NORTHWEST 57TH AVENUE
MIAMI, FL 33055

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 172973
HIALEAH, FL 33017

New Mailing Address:

FEI Number: 65-0970598

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUBOIS, LIBI
16921 N.W. 57 AVENUE
MIAMI, FL 33055 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PST () Delete
Name: MONTENEGRO-TOIRAC, MARLENE
Address: P.O. BOX 248816
City-St-Zip: CORAL GABLES, FL 33124

Title: D () Delete
Name: DUBOIS, LIBI
Address: P.O. BOX 248816
City-St-Zip: CORAL GABLES, FL 33124

Title: D () Delete
Name: RIVERA, IRMA
Address: P.O. BOX 248816
City-St-Zip: CORAL GABLES, FL 33124

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARLENE MONTENEGRO-TOIRAC

PST

06/15/2004

Electronic Signature of Signing Officer or Director

Date