FILED 2006 FOR PROFIT CORPORATION ANNUAL REPORT Mar 24, 2006 08:00 AM **Secretary of State** DOCUMENT # P00000013510 1. Entity Name EDGEWATER HOMES, INC. Principal Place of Business Mailing Address 3518 NORTHWEST 36 STREET 3518 NORTHWEST 36 STREET MIAMI, FL 33142 MIAMI, FL 33142 03202006 No Cha-P CRZE034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0979371 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent COLLAZO, HIRAM DO NOT WRITE 3518 NORTHWEST 36 STREET MIAMI, FL 33142 IN THIS SPACE 8. 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. I am lamiliar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and little it applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be U00000480119 04/10/06-80031-005 158.75 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS COLLAZO, HIRAM NAME STREET ADDRESS 3518 NORTHWEST 36 STREET MIAMI, FL 33142 CITY-ST-709 TITLE NASAF STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP STEE IN THIS SPACE MAME STREET ADDRESS CITY-ST-ITP NAME STREET ADDRESS CITY+ST-77P SIBLE NAME

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental 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 by Yusake impowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment all other like empowered.

SIGNATURE:

STREET ADDRESS CNY-ST-ZIP

> 3-<u>23-06</u> ED NAME OF SIGNING OFFICER OR DIRECTOR

305-635-69