2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P00000052061 07-22-2004 90006 022 ***150.00 HOME DEVELOPERS GROUP INC. Principal Place of Business Mailing Address LAKE CHASE ISLAND WAY 44049381 9116 LAKE CHASE ISLAND WAY #9116 **TAMPA. FL 33626** TAMPA, FL 33626 2. Principal Place of Business 3. Mailing Address 8717 HICKORYWOOD Lane Suite, Apt. #, etc. 07092004 Chg-P CR2E034 (10/03) 4. FEI Number Applied For City & State City & State Jampa 59-3722073 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SMOOK, MARIUS J Street Address (P.O. Box Number is Not Acceptable) 9116 LAKE CHASE ISLAND WAY TAMPA, FL 33626 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 familiar with, and accept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution corporation did not receive the prior notice? Due by September 8, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. ----₹ΠΠLE^{EX} > ± • MR TITLE ...' ☐ Delete NAME -- ` SMOOK, MARIUS J 8717 Hickorywood Lane Tomas FL 33615 NAME ' 9116 LAKE CHASE ISLAND WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 33626----☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CiTY-ST-7IP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP -CITY:ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change · · ☐ Addition CTITLE S ☐ Delete NAME NAME The 124 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 or trustee empowered 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 with an address, with all other limit empowered. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Jul 22, 2004 8:00 am

Date

Daytime Phone #



Alfachment 44049381

July 2, 2004

Division of Corporations 409 East Gaines Street Tallahassee, Florida 32399

Re:

2004 UBR for HOME DEVELOPERS GROUP INC

Florida Document No.

To Whom It May Concern:

It has come to my attention that the above-referenced Corporation did not received the 2004 Uniform Business Report package concerning its annual report and therefore failed to file a timely UBR for 2004. We ask that, since the original package was never delivered to our address, that you waive the late filing fee and accept our payment of \$150.00 for the Corporation's 2004 UBR.

If you have any questions, please contact me at (813) 909-0599. Thank you for your consideration.

Sincerely,

Wendy Corlett, EA

Lends Porlett

Enclosures