

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000055539

FILED
Jun 01, 2004
Secretary of State

Entity Name: HOMELAND REAL ESTATE, INC.

Current Principal Place of Business:

10031 PINES BOULEVARD
SUITE 242
PEMBROKE PINES, FL 33024

New Principal Place of Business:

1500 WESTON ROAD
SUITE 208
WESTON, FL 33326

Current Mailing Address:

10031 PINES BOULEVARD
SUITE 242
PEMBROKE PINES, FL 33024

New Mailing Address:

1500 WESTON ROAD
SUITE 208
WESTON, FL 33326

FEI Number: 65-1017923

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ECHEVERRY, ELIZABETH
12579 NW 10TH COURT
SUNRISE, FL 33323 US

Name and Address of New Registered Agent:

ECHEVERRY, ELIZABETH
197 LAKEVIEW DRIVE
106
WESTON, FL 33326 US

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: ELIABETH ECHEVERRRY

06/01/2004

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: DP (X) Delete
Name: DANGOND, JOSE I
Address: 1097 GOLDEN CANE DR
City-St-Zip: WESTON, FL 33024

Title: D (X) Delete
Name: JIMENEZ, MIRIAM
Address: 12579 NW 10TH CT.
City-St-Zip: SUNRISE, FL 33323

Title: P () Delete
Name: ECHEVERU, ELIZABETH
Address: 12579 NW 10TH CT.
City-St-Zip: SUNRISE, FL 33323

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PD (X) Change () Addition
Name: ECHEVERRY, ELIZABETH
Address: 197 LAKEVIEW DRIVE, UNIT 106
City-St-Zip: WESTON, FL 33326

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: E. ECHEVERRY

P

06/01/2004

Electronic Signature of Signing Officer or Director

Date