

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 10, 2003 8:00 am
Secretary of State

02-10-2003 90130 004 ***150.00

DOCUMENT # P0000110183

1. Entity Name
R.T.M. DREAM HOMES, INC.



Principal Place of Business
8985 S. HWY A1A
MELBOURNE BCH FL 32951

Mailing Address
8985 S. HWY A1A
MELBOURNE BCH FL 32951

90020947



2. Principal Place of Business

407 BEVERLY CT.

3. Mailing Address

407 BEVERLY CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

MELBOURNE Bch FL

City & State

MELBOURNE Bch, FL

4. FEI Number

59-3685085

Applied For

Not Applicable

Zip
32951

Country

BREVARD

Zip
32951

Country

BREVARD

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOWRY, ROBERT
8985 S. HWY A1A
MELBOURNE BCH FL 32951

7. Name and Address of New Registered Agent

Name: ROBERT MOWRY
Street Address (P.O. Box Number is Not Acceptable): 407 BEVERLY CT.
City: MELBOURNE Bch
City: FL Zip Code: 32951

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.

SIGNATURE: *Robert Mowry*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-6-03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: D Delete
NAME: MOWRY, ROBERT
STREET ADDRESS: 8985 S. HWY A1A
CITY-ST-ZIP: MELBOURNE BCH FL 32951

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: 407 BEVERLY CT
CITY-ST-ZIP: 407 BEVERLY CT

TITLE: D Delete
NAME: MOWRY, THERESA
STREET ADDRESS: 8985 S. HWY A1A
CITY-ST-ZIP: MELBOURNE BCH FL 32951

TITLE: Change Addition
NAME: Change Addition
STREET ADDRESS: 407 BEVERLY CT
CITY-ST-ZIP: 407 BEVERLY CT

TITLE: Delete
NAME: Delete
STREET ADDRESS: Delete
CITY-ST-ZIP: Delete

TITLE: Change Addition
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CITY-ST-ZIP: Change Addition

12. I hereby certify that the information supplied with this 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 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 like empowered.

SIGNATURE:

Robert Mowry
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-6-03
Date

321
431-7720
Daytime Phone #

CR2E034 (10/02)