FILED 2007 FOR PROFIT CORPORATION **ANNUAL REPORT** Apr 04, 2007 08:00 A Secretary of State DOCUMENT # P01000113133 1. Entity Name HOME OWNERS REALTY DEPOT, INC. Principal Place of Business Mailing Address 1400 WEST OAK ST. 1400 WEST OAK ST. KISSIMMEE, FL 34741 KISSIMMEE, FL 34741 03022007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For Not Applicable 59-3761236 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GONZALEZ, RALPH A JR. DO NOT WRITE 1400 W. OAK STREET SUITE G IN THIS SPACE KISSIMMEE, FL 34741 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) U000000690106 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 04/11/07-80063-008 150.00 10. OFFICERS AND DIRECTORS ΡD TITLE NAME GONZALEZ, RALPH A JR. STREET ADDRESS 1400 W. OAK ST., STE G CITY-ST-ZIP KISSIMMEE, FL 34741 NAME GONZALEZ, YAMILA 1400 W OAK ST, STE. G STREET ADDRESS KISSIMMEE, FL 34741 CITY-ST-7IP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP THILE NAME STREET ADDRESS CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental export 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 air

SIGNATURE:

TITLE

STREET ADDRESS CITY-ST-ZIP

R DIRECTOR

Davtime Phone #