2005 FOR PROFIT CORPORATION

FILED

ANNUAL REPORT				Jan 24, 2005 08:00 AM		
DOCUMENT # P02000019722 1. Entity Name USA HOME BROKERS, INC.				Secretary of State		
Principal Place 1440 VIEUX (TALLAHASSE	CARRE	Mailing Address 1440 VIEUX CARRE TALLAHASSEE, FL 32308			EEND KEN EEN EEN EENKEEN	I BANTAF NIKIK ININ ININ INING IRAN FIRING ININ
	A CONTRACTOR OF THE CONTRACTOR	and the second s		01202005	No Chg-P	CR2E034 (10/03)
D	O NOT WRITE	IN THIS SPA	CE	4. FEI Number 03-041	er er	Applied For Not Applicat
	The second second			5. Certificate	of Status Desired	S8.75 Additional Fee Required
6. Name and Address of Current Registered Agent HAMPHILL, DAVID R 1440 VIEUX CARRE SR TALLAHASSEE, FL 32308					NOT W THIS SP	والإنجاج والمحافظة والمسترك المساري المنافر المتابات والمتابية
	named entity submits this statement for ions of registered agent.	· · · · · · · · · · · · · · · · · · ·	red office or register		th, in the State of Flo	orlda. I am familiar with, and acce
Fil. After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	9. Election Campaign Fina	ncing \$5.	.00 May Be ed to Fees		
10.	OFFICERS AND	DIRECTORS				The second secon
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HEMPHILL, DAVID R 1440 VIEUX CARRE TALLAHASSEE, FL 32308				UQQQQQ	190234 20130-010 150 00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					01/24/0370	00120-013 130.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT W	RITE
TITLE NAME STREET ADDRESS				IN '	THIS SF	PACE

12. I hereby certify that the information supplied with this fliing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 receive 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:

CITY-ST-ZIP TITLE

STREET ADDRESS

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-05

850-350-0328 Daytime Phone 4

18th and a street and the street and

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