


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 18, 2005 8:00 am**  
**Secretary of State**

01-18-2005 90048 003 \*\*\*150.00

<b>DOCUMENT # P02000021007</b>	
1. Entity Name <b>HOME SUITE HOMES, INC.</b>	

Principal Place of Business <b>2500 QUANTUM LAKES DR 203 BOYNTON BEACH, FL 33426</b>	Mailing Address <b>2500 QUANTUM LAKES DR 203 BOYNTON BEACH, FL 33426</b>
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40002330

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01132005 Chg-P CR2E034 (10/03)

4. FEI Number <b>42-1608613</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
<b>ALICEA, R. JEAN 12 G CROSSING CIR BOYNTON BEACH, FL 33435</b>		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	

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) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

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 NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>ALICEA, R. JEAN</b> <b>12 G CROSSING CIR</b> <b>BOYNTON BEACH, FL 33435</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D.</b> <b>R. JEAN ALICEA</b> <b>P.O. Box 4524</b> <b>BOYNTON BEACH, FL 33424</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: R. Jean Alicea **1-13-05** **561 333-7782**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

# ATTACHMENT

Home suite Homes, Inc.  
2500 Quantum Lakes Dr. Ste. 203  
Boynton Beach, Fl. 33426  
561-333-1781

40002390

#P02000021007

Att: Division of Corporations  
Re: Physical Address for Corporation Officers/Directors

January 13, 2005-

To Whom It May Concern:

I did not include a physical address for myself, R. Jean Alicea, director of Home suite Homes, Inc. because I am in the process of changing my residence. I included a post office address for mailing.

If you must have a physical address, you can record the following address until April, 2005

It is 1022 New Lake Dr. Boynton Beach, Fl. 33426

Thank you,

*R. Jean Alicea*

R. Jean Alicea  
Home suite Homes, Inc.