

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 25, 2004 8:00 am
Secretary of State

08-25-2004 90002 032 ***150.00

DOCUMENT # P02000052243
1. Entity Name
HOMEWORLD PROPERTIES, INC.



Principal Place of Business
**10326 BELMONT STAKES CT
JACKSONVILLE, FL 32257**

Mailing Address
**10326 BELMONT STAKES CT
JACKSONVILLE, FL 32257**

54069769



08162004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
04-3665889

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DIGIOVANNI, JAMES R
10326 BELMONT STAKES CT
JACKSONVILLE, FL 32257**

DO NOT WRITE IN THIS SPACE

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 \$550.00
Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	DIGIOVANNI, JAMES R
STREET ADDRESS	10326 BELMONT STATES CT
CITY-ST-ZIP	JACKSONVILLE, FL 32257
TITLE	D
NAME	DIGIOVANNI, KATHY A
STREET ADDRESS	10326 BELMONT STAKES CT
CITY-ST-ZIP	JACKSONVILLE, FL 32257
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 empowers.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

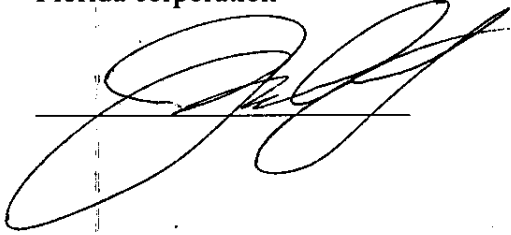
Date _____ Daytime Phone # _____

Attachment.

P02000052243 ~~54069769~~

We the officer's of Homeworld Properties, Inc., a Florida corporation certify that we did not received the annual report at our place of business.

By: Homeworld Properties, Inc., a
Florida corporation

A handwritten signature in black ink, consisting of a large, stylized initial 'J' followed by a surname, written over a horizontal line.

Attachment

57069769
#P02000052243

KAHANE & ASSOCIATES, P.A.

1815 GRIFFIN ROAD, SUITE 302
DANIA BEACH, FLORIDA 33004
TELEPHONE (954) 920-4000
FACSIMILE (954) 920-2999

August 19, 2004

Secretary of State
Division of Corporation
P.O. Box 6327
Tallahassee, Florida 32314

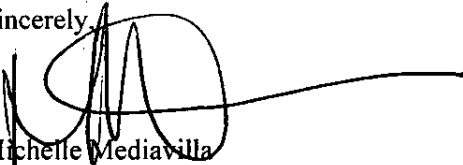
RE: Homeworld Properties, Inc

To whom it may concern:

Enclosed you will find our check in the amount of \$150.00, representing payment for Annual Report for the above referenced corporation. Attached you will find a letter executed by the officer of the corporation certifying that they never received the annual report to the corporate mailing address. Please apply according.

Should you have any questions, please feel free to contact me.

Sincerely,



Michelle Mediavilla
Paralegal/Closer