


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000059507	
1. Entity Name 3-D HOMES, INC.	

Principal Place of Business 105 GRANADA COURT PALM SPRINGS, FL 33461	Mailing Address 105 GRANADA COURT PALM SPRINGS, FL 33461
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DO NOT WRITE IN THIS SPACE



07262004 No Chg-P CR2E034 (10/03)

4. FEE Number 46-0485719	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent DIAZ, DAVID 105 GRANADA COURT PALM SPRINGS, FL 33461

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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 _____ <small>Signature typed or printed name of registered agent and title if applicable</small>	(NOTE: Registered Agent signature required when reappointing)	DATE _____
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FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DIAZ, DAVID 105 GRANADA COURT PALM SPRINGS, FL 33461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAZ, CLARA 105 GRANADA COURT PALM SPRINGS, FL 33461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIAZ, HUMBERTO 105 GRANADA COURT PALM SPRINGS, FL 33461
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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08/19/04-80002-024 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>Clara Diaz</i>	07/22/04	(561) 642-2799
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date</small>	<small>Daytime Phone #</small>