2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000023111

Entity Name: HOMEXPERTS, INC.

FILED Mar 23, 2004 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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11767 SW 93RD TERRACE 10700 N. KENDALL DRIVE, SUITE 401 MIAMI, FL 33186

MIAMI, FL 33176

Current Mailing Address: New Mailing Address:

11767 SW 93RD TERRACE 10700 N. KENDALL DRIVE, SUITE 401

MIAMI, FL 33186 MIAMI, FL 33176

FEI Number: 57-1153068 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VILLENA, ROBERT 11767 SW 93 TERR MIAMI, FL 33176

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD () Delete Title: (X) Change () Addition VILLENA, JOSE IRAOLA, MANUEL J Name: Name: Address:

11767 SW 93 TERR 812 ALFONSO AVENUE Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: CORAL GABLES, FL 33146

Title: VPD Title: VPD (X) Change () Addition () Delete

Name: VILLENA, MARIO Name: VILLENA, JOSE A 11767 SW 93 TERR 9081 SW 124 STREET Address: Address: MIAMI, FL 33176 MIAMI, FL 33176 City-St-Zip: City-St-Zip:

Title: Title: VPD (X) Change () Addition STD () Delete

VILLENA, ROBERT VILLENA, MARIO A Name: Name: 11767 SW 93 TERR 7501 SW 82 COURT Address: Address: City-St-Zip: MIAMI, FL 33176 City-St-Zip: MIAMI, FL 33143

Title: () Delete Title: STD () Change (X) Addition

VILLENA, ROBERT A Name: Name: Address: Address: 11767 SW 93 TERRACE City-St-Zip: City-St-Zip: MIAMI, FL 33186

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT VILLENA STD 03/23/2004