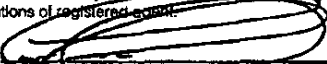


2004.FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-12-2004 90672 037 ***150.00

DOCUMENT # P03000028899			
1. Entity Name ALL ESTATE HOMES INC.			
Principal Place of Business 1637 E VINE STREET SUITE 125 KISSIMMEE, FL 34744 12720 South Orange Blossom		Mailing Address 1637 E VINE STREET SUITE 125 KISSIMMEE, FL 34744	
2. Principal Place of Business 12720 S. Orange Blossom Trail		3. Mailing Address P.O. Box 620145	
Suite, Apt. #, etc. Suite # 24		Suite, Apt. #, etc.	
City & State Orlando, FL		City & State Orlando, FL	
Zip 32837	Country Orange	Zip 32862	Country Orange
4. Name and Address of Current Registered Agent MANGUAL, ELIAS 1519 AVLEIGHT CIRCLE ORLANDO, FL 32824		7. Name and Address of New Registered Agent 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  Elias E. Mangual		DATE 4/10/04	
FILE NOW!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00		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 D	☐ Delete	TITLE	☐ Change ☐ Addition
NAME MANGUAL, ELIAS		NAME	
STREET ADDRESS 1519 AVLEIGHT CIRCLE		STREET ADDRESS	
CITY-ST-ZIP KISSIMMEE, FL 34744		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
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TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
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STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
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:  Elias E. Mangual		DATE 4/10/04 407 240-4182	

66414930



04102004 Chg-P CR2E034 (10/03)

4. FEI Number
35-2197869 Applied For
Not Applicable

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

**FILE NOW!! FEE IS \$150.00
After May 1, 2004 Fee will be \$350.00**

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 D	☐ Delete	TITLE	☐ Change ☐ Addition
NAME MANGUAL, ELIAS		NAME	
STREET ADDRESS 1519 AVLEIGHT CIRCLE		STREET ADDRESS	
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TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
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TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
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CITY-ST-ZIP		CITY-ST-ZIP	
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CITY-ST-ZIP		CITY-ST-ZIP	

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SIGNATURE:  **Elias E. Mangual** DATE: **4/10/04** 407 240-4182