## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000030654

650 NORTH SHORE DRIVE

MIAMI BEACH, FL 33141

Address:

City-St-Zip:

FILED Jun 04, 2007 Secretary of State

Entity Nai	me: VIEWH	HOME DEVELOR	PMENT, CORP.					
Current Principal Place of Business:				N	New Principal Place of Business:			
	"H SHORE [ ACH, FL 33							
Current Mailing Address:				New Mailing Address:				
	H SHORE [ ACH, FL 33							
FEI Number:		FEI Number	FEI Number Applied For ( )		er Not Appl	icable (X)	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
650 NORT MIAMI BEA The above	CLAUDIA E TH SHORE I ACH, FL 33 named enti e of Florida.	DRIVE 141 US	tatement for the p	ourpose of c	changing it	s registe	red office or registered agent, or bo	oth,
SIGNATU	RE:							
Electronic Signature of Registered Agent					Date			
		.193(2)(b), F.S., the cing Trust Fund Co	corporation did no ontribution ( ).	ot receive the	prior notice	е.		
OFFICERS AND DIRECTORS:				A	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:		() Delete CLAUDIA E SHORE DRIVE CH, FL 33141		N A	itle: lame: ddress: :ity-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:		() Delete CTOR J SHORE DRIVE CH, FL 33141		N A	itle: lame: ddress: ity-St-Zip:	650 NOR	(X) Change ( ) Addition EZ, CATALINA TH SHORE DRIVE EACH, FL 33141	
Title: Name:	SC GONZALEZ	(X) Delete CATALINA			itle: lame:		( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: CLAUDIA MURILLO PD 06/04/2007