

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000036264

Entity Name: HOMEDEAL INC.

FILED
Sep 06, 2007
Secretary of State

Current Principal Place of Business:

PO BOX 8401
CORAL SPRINGS, FL 33075 US

New Principal Place of Business:

6092 NW 75TH WAY
PARKLAND, FL 33067

Current Mailing Address:

PO BOX 8401
CORAL SPRINGS, FL 33075 US

New Mailing Address:

FEI Number: 45-0508744 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLOZZI, ANTONELLA F
939 ADAMS STREET
HOLLYWOOD, FL 33019 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARLOZZI, ANTONELLA
Address: PO BOX 8401
City-St-Zip: CORAL SPRINGS, FL 33075 US

Title: VP () Delete
Name: CARLOZZI, ANTONELLA
Address: PO BOX 8401
City-St-Zip: CORAL SPRINGS, FL 33075 US

Title: TREA () Delete
Name: CARLOZZI, ANTONELLA
Address: PO BOX 8401
City-St-Zip: CORAL SPRINGS, FL 33075 US

Title: SECR () Delete
Name: CARLOZZI, ANTONELLA
Address: PO BOX 8401
City-St-Zip: CORAL SPRINGS, FL 33075 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ANTONELLA CARLOZZI

P

09/06/2007

Electronic Signature of Signing Officer or Director

_____ Date