2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 13, 2006 08:00 AM Secretary of State

1. Entity Nam	MENT # P03000042310 stom homes, INC.	0			Secre	tary of State
	TREET 6TH FL 1	illing Address 11 SW 3 STREET 6TH FL IAMIL FL 33130				
E	O NOT WRITE IN		CE	02072006 4. FEI Numb 57-116	No Chg-P	CR2E034 (11/05) Applied For Not Applicable \$8.75 Additional Fee Required
HARRIS, E 111 SW 3 MIAMI, FL	ELLIOTT STREET 6TH FL		DO NOT WRITE IN THIS SPACE			
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 Signature, typed or printed reme of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) DATE						
				00 May Be ed to Fees		
DITLE MAME SHREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIREC PD GARCIA-CARRILLO, MICHAEL 14600 S.W. 146TH STREET MIAMI, FL 33186	TORS				
TITLE NAME STREET ADDRESS CHY-ST-27P	VPD GARCIA-CARRILLO, PEDRO 14600 S.W. 146TH STREET MIAMI, FL 33186				U000004 02/24/06-8	133429 30017-021 159 .7 5
NAME STREET ADDRESS CITY-ST-ZIP	TD GARCIA-CARRILLO, PEDRO JR 14600 S.W. 146TH STREET MIAMI: FL 33186				NOT WI	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CASTELLANOS, RAIMUNDO G 14600 S.W. 146TH STREET MIAMI, FL 33186			IN T	THIS SPA	ACE
Title Name Street address City -51 - 219	S HARRIS, ELLIOTT 111 S.W. 3RD STREET, 6TH FLOOR MIAMI, FL 33130					
TITLE NAME STREET ADDRESS CHY-ST-ZIP	(!				·	
12. I hereby of indicated of the corr changed,	certify that the information supplied with this fill on this report or supplemental report is true ar poration or the receiver or trustee empowered or on an attachment with an address, with ail to	ing does not qualify for the ex- nd accurate and that my signa to execute this report as requi other like empowered.	emptions contained ture shall have the s ired by Chapter 607	in Chapter 119 ame legal effec Florida Statute	, Florida Statutes.) full tas if made under oal s; and that my name a	orther certify that the information th; that I am an officer or director appears in Block 10 or Block 11 if

Secretary

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

2/9/06

(305) 358-0146

Daytime Phone #