## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 26, 2004 8:00 am Secretary of State **DOCUMENT # P03000048821** 1. Entity Name 03-26-2004 90010 039 \*\*\*150.00 **TUTO HOMES CORPORATION** Principal Place of Business Mailing Address 14614 SW 50TH TERR. 14614 SW 50TH TERR. 71022016 MIAMI, FL 33175 MIAMI, FL 33175 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02242004 Cha-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 35-2203909 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HERNANDEZ, KENNETH 14614 SW 50TH TERR. Street Address (P.O. Box Number is Not Acceptable) MIAMI, FL 33175 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Title ☐ Delete TITLE Addition ☐ Change HERNANDEZ, KENNETH NAME NAME 14614 SW 50TH TERR. STREET ADDRESS STREET ADDRESS CITY-ST-7/P MIAMI, FL 33175 CITY-ST-ZIF TITLE ☐ Delete ☐ Change ☐ Addition DIAZ, ALI NAME NAME 14614 SW 50TH TERR. STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI, FL 33175 COY-ST-78 ☐ Delete time ☐ Change Addition VELAZQUEZ, MANRIT NAME NAME STREET ADDRESS 14614 SW 50TH TERR. STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33175 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 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE · Delete Change Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this bling 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 tate 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 the empowered. **SIGNATURE:** G OFFICER OR DIRECTOR

**FILED**