2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000102240

Entity Name: FLORIDA HOME GROUP INVESTORS, INC.

FILED Mar 08, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2645 EXECUTIVE PARK DRIVE 10211 PINES BLVD

WESTON, FL 33331 #143

PEMBROKE PINES, FL 33028 US

Current Mailing Address: New Mailing Address:

2645 EXECUTIVE PARK DRIVE 10211 PINES BLVD

PEMBROKE PINES, FL 33028 WESTON, FL 33331 US

FEI Number: 20-2415020 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

STEVEN, SAMILOW F ESQ CASTILLO, REINA I 2645 EXÉCUTIVE PARK DRIVE 2515 WEST 65 STREET WESTON, FL 33331 HIALEAH, FL 33016

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: REINA I. CASTILLO 03/08/2005

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

BOLANOS, MANUEL CASTILLO, REINA I Name: Name: 2645 EXECUTIVE PARK DRIVE 2515 WEST 65 STREET Address: Address: City-St-Zip: WESTON, FL 33331 City-St-Zip: HIALEAH, FL 33016 US

Title: Title: VΡ (X) Change () Addition () Delete

BOLAÑOS, MANUEL E Name: LEON, FRANCISCO J Name: 8610 SHERMAN CIRCLE NORTH 10211 PINES BLVD # 143 Address: Address: MIRAMAR, FL 33025 PEMBROKE PINES, FL 33028 US City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete

Name: MASIS, CARLOS L Name: 2515 WEST 65 STREET Address Address: City-St-Zip: City-St-Zip: HIALEAH, FL 33016 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: REINA I. CASTILLO PD 03/08/2005