

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 01, 2004 8:00 am
Secretary of State

06-01-2004 90006 030 ***150.00

DOCUMENT # P03000150411

1. Entity Name
FIRST HOME REALTY GROUP, INC.



54056121



Principal Place of Business
**4601 SHERIDAN ST
#210
HOLLYWOOD, FL 33021**

Mailing Address
**4601 SHERIDAN ST
#210
HOLLYWOOD, FL 33021**

2. Principal Place of Business
3878 Sheridan ST
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

05252004 Chg-P CR2E034 (10/03)

City & State
Hollywood FL
Zip
33021

City & State
Country

4. FEI Number
20-0499058
Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**GLEMAUO, HARRY J
4601 SHERIDAN ST
#210
HOLLYWOOD, FL 33021**

7. Name and Address of New Registered Agent

Name
HARRY J. GLEMAUO
Street Address (P.O. Box Number is Not Acceptable)
3878 SHERIDAN ST
City
Hollywood FL Zip Code
33021

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 **HARRY J. GLEMAUO**
Signature of registered agent and type if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

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

10. OFFICERS AND DIRECTORS

| | | |
|--|--|---------------------------------|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D GLEMAUO, HARRY J 4601 SHERIDAN ST. #210 HOLLYWOOD, FL 33021 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D FUEWNTES, A.C. 4601 SHERIDAN ST. #210 HOLLYWOOD, FL 33021 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | DIP GLEMAUO, HARRY J.M. 3878 SHERIDAN ST HOLLYWOOD FL 33021 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D FUEWNTES, AMAURY 3878 SHERIDAN ST HOLLYWOOD FL 33021 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing 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 true 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 like empowered.

SIGNATURE: **HARRY J. GLEMAUO**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

954 980 4323