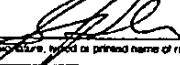
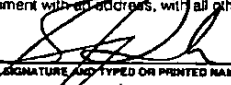


FILED
Apr 14, 2005 8:00 am
Secretary of State

03-02-2005 90078 034 ***150.00

2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P04000107311 1. Entity Name HOUSE HUNTERS REAL ESTATE, INC.			
Principal Place of Business 6889 TOWN HARBOUR BLVD STE #1119 BOCA RATON, FL 33433		Mailing Address PO BOX 272651 BOCA RATON, FL 33427-2651	
2. Principal Place of Business 5901 Camino Del Sol #201 Suite, Apt. #, etc.		3. Mailing Address Same as above Suite, Apt. #, etc.	
City & State Boca Raton, FL 33433		City & State	
Zip 33433	Country USA	Zip	Country
4. FEI Number 20-1400328		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PAULSEN, STEVEN R 6889 TOWN HARBOUR BLVD STE #1119 BOCA RATON, FL 33433 5901 Camino Del Sol #201 Boca Raton, FL 33433		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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: 		DATE: 2-24-05	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPV PAULSEN, STEVEN R 6889 TOWN HARBOUR BLVD STE #1119 BOCA RATON, FL 33433 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same as left ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PAULSEN, STEVEN R 6889 TOWN HARBOUR BLVD STE #1119 BOCA RATON, FL 33433 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Same as left ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: 		DATE: 2-24-05	