2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000161261

Entity Name: HORIZON HOME LOANS INC.

FILED Jun 03, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Busin	

7975 MIAMI LAKES DR. 15841 PINES BLVD.

SUITE 330 STE 259
MIAMI LAKES, FL 33016 PEMBROKE PINES, FL 33027

Current Mailing Address: New Mailing Address:

15841 PINES BLVD. 15841 PINES BLVD.

SUITE 259 STE 259

PEMBROKE PINES, FL 33027 PEMBROKE PINES, FL 33027

FEI Number: 20-3910984 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:

ALMODOVAR, RAFAEL A 5275 SW 152 AVENUE MIRAMAR, FL 33027 US

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:

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

 Name:
 ALMODOVAR, RAFAEL A
 Name:
 ALMODOVAR, RAFAEL A

 Address:
 5275 SW 152 AVE.
 Address:
 5275 SW 152 AVE.

City-St-Zip: PEMBOKE PINES, FL 33027 US City-St-Zip: PEMBOKE PINES, FL 33027 US

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

Name: ZAMORA, PEDRO M Name: CRESPO, LUZ E

 Address:
 582 NW 162 AVE.
 Address:
 15841 PINES BLVD., STE 259

 City-St-Zip:
 PEMBROKE PINES, FL 33028 US
 City-St-Zip:
 PEMBROKE PINES, FL 33027 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RAFAEL ALMODOVAR P 06/03/2008