2007 FOR PROFIT CORPORATION ANNUAL REPORT

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SIGNATURE:

May 14, 2007 8:00 am Secretary of State DOCUMENT # P06000028041 05-14-2007 90092 003 ***150.00 1. Entity Name PRIETO HOME BUILDERS, INC. Principal Place of Business Mailing Address 8218 SILVER BIRCH WAY 8218 SILVER BIRCH WAY LEEHIGH ACRES, FL 33971 US LEEHIGH ACRES, FL 33971 US Principal Place of Business - No P.O. Box # 1. Mailing Address 4 4526 28 Suite, Apt. #, etc. 05012007 CR2E034 (12/06) Applied For Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required Address of Current Registered Agent Name ar 7. Name and Address of New Registered Agent PRIETO, JESUS 8218 SILVER BIRCH WAY LEEHIGH ACRES, FL 33971 8. The above named entity its 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 obligation (NOTE: Registered Agent signature required when reinstating) of registered agent and title if applicable 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE PD Delete TITLE PRIETO, JEŠUS NAME NAME 8218 SILVER BIRCH WAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEEHIGH ACRES, FL 33971 CITY-ST-7IP STD TITLE III Delete TATLE Change ☐ Addition PRIETO, JAMES NAME NAME STREET ADDRESS 8218 SILVER BIRCH WAY STREET ADDRESS CITY-ST-ZIP LEEHIGH ACRES, FL 33971 CITY-ST-ZIP ☐ 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 TITE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Сталде Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied indicated on this report or supplemental report of the corporation or the reserver or trustee en with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the re eiver or trust

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