

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2007 8:00 am
Secretary of State

01-26-2007 90038 005 ***150.00

DOCUMENT # P06000101649					
1. Entity Name AMERICAN HOME BUILDERS OF SOUTH FLORIDA, INC.					
Principal Place of Business 13790 KENDALE LAKES DRIVE MIAMI, FL 33183 US			Mailing Address 13790 KENDALE LAKES DRIVE MIAMI, FL 33183 US		
2. Principal Place of Business - No P.O. Box # 13790 KENDALE LAKES DR		3. Mailing Address 13790 KENDALE LAKES DR.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State MIAMI FL		City & State MIAMI FLORIDA		4. FEI Number 20-5320467	
Zip 33183		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent IZQUIERDO, RAFAEL 13790 KENDALE LAKES DRIVE MIAMI, FL 33183			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: <u>RAFAEL IZQUIERDO</u> DATE: <u>1/20/2007</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees Trust Fund Contribution.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P IZQUIERDO, RAFAEL 13790 KENDALE LAKES DRIVE MIAMI, FL 33183	<input type="checkbox"/> Delete			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>RAFAEL IZQUIERDO</u> <u>1/20/07</u> <u>786 295 9861</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					