2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000123124

City-St-Zip:

PALMETTO BAY, FL 33157

FILED Jul 13, 2009 Secretary of State

Entity Name: MARIA HOMES REALTY, INC. **Current Principal Place of Business: New Principal Place of Business:** 8200 NW 27TH ST STE 116 8141 SW 170 TERR MIAMI, FL 33122 PALMETTO BAY, FL 33157 **Current Mailing Address: New Mailing Address:** 8200 NW 27TH ST STE 116 8141 SW 170 TERR MIAMI, FL 33122 PALMETTO BAY, FL 33157 FEI Number: 90-0417363 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LADOWSKI, JADWIGA M LADOWSKI, JADWIGA M 8200 NW 27TH ST STE 116 8141 SW 170 TERR MIAMI, FL 33122 PALMETTO BAY, FL 33157 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: 07/13/2009 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: () Delete () Change () Addition LADOWSKI, J. M Name: Name: 8141 SW 170 TERRACE Address: Address: City-St-Zip: PALMETTO BAY, FL 33157 City-St-Zip: Title: VSTD Title: () Change () Addition () Delete Name: LADOWSKI, L. Z Name: 8141 SW 170 TERRACE Address: Address: PALMETTO BAY, FL 33157 City-St-Zip: City-St-Zip: Title: Title: CFO () Delete () Change () Addition LADOWSKI, L. Z Name: Name: 8141 SW 170 TERRACE Address: Address:

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.

City-St-Zip:

SIGNATURE: LADOWSKI L.Z. CEO 07/13/2009