FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham *

Secretary of Stale
DIVISION OF CORPORATIONS

DOCUMENT # P9400008917 (4)

HOMESTEED INTERNATIONAL, INCORPORATED

FILED May 19 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 17300 SW 246TH STREET 17300 SW 246TH STREET HOMESTEAD FL 33031 HOMESTEAD FL 33031-3521 US								
						The state of the s	e of Last R 9/1996	eport
2. Principal 21	Place of Business	2a. Mailing Address	¬ * ·			4. FEI Number 65-0477915	Applied For Not Applicable	
	et #, etc.	Suite, Apt. #. etc.	Suite, Apt. #. etc.			5. Certificate of Status Desired	\$8.75 /	Additional
Orty & St	ale	City & State	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	Cou 30	ntry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No		
Name and Address of Current Registered Agent						10. Name and Address of New Registered A	gent	
. JENSEN, JANE 17300 SW 248TH ST. HOMESTEAD FL 33031				81	Name			
				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
•••	ONICO ICADO I			83				
				84	City	FL		Code
11. Pursua office o agent.	nt to the provisions of Sections 607 r registered agent, or both, in the t I am familiar with, and accept the c	7 0502 and 607.1508, Florida Statu State of Florida Such change was obligations of, Section 607.0505, F	ites, the ab authorized lorida Stati	oove d by utes	r the corpora	poration submits this statement for the purpose of tion's board of directors. I hereby accept the appo	changing It intment as	s registered registered
SIGNATURI								
12.	Signature, typed or protect rand of registered agent and title if applicable. (NOTE: Register OFFICERS AND DIRECTORS 13			1 Age	nt signature requi	ined when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12
I TEF	M	DELETE	1.170	TLE			Change	Addition
NAME	JENSEN, JANE	EN. JANE						
STREET ADDRES		1.3\$			ADORESS			ĺ
CITY-S1-ZiP	LIGHTOTTA PLANTA			TY-S	T-21P			
I-TLF	8	DELETE 2.11					Change	Addition
NAME	JENSEN, CAROLINE W		2 2 NA	ME				
STREET ADDRES	s 17300 SW 246TH ST.		23\$1	REET	ADDRESS			
CUT-ST-ZIP	HOMESTEAD FL 33031		2 4 (1	ITY-S	11- ZIP			
TITLE				3.1 TITLE			Change	☐ Addition
NAMÉ.			3.2 NA	ME				
STREET ADDRES	33:			3.3 STREET ADORESS				

14. If do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

3.4 CITY-ST-ZIP

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

DELETE

DELETE

DELETE

SIGNATURE:

CHY-\$1-742

STREET ADORESS

STREET ADDRESS CITY: \$1-76°

STREET ADDRESS

GHY - 51 - Z01

1-114

NAME

TITLE

NAME

Table

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IGNA THE AND TYPED ORPHINTED NAME OF SIGNING OFFICER OR DIRECTO

Way 8, 1997

200002197 -06/02/97--01016

305.248-6294

☐ Change

Change

Addition

___ Addition