SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

FILED
Sep 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000021425

1. Corporation Name
San Diego Homes, Inc

Principal Place of Business — Mailing Address
13727 SW 152nd St.
Suite 104

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03-16-1994
4. FEI Number: 65-0506251 — ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 17132 SW 142 Ct.	26 13727 SW 152 St.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 # 104
City & State 23 Miami, Florida	City & State 28 Miami, Florida
Zip 24 33177 — Country 25 U.S.A.	Zip 29 33177 — Country 30 U.S.A.

9. Name and Address of Current Registered Agent
Miami Corporate Systems, Inc.
5200 Blue Lagoon Dr.
Suite 700
Miami, Florida 33126, US.

10. Name and Address of New Registered Agent
61 Name: Thomas G. Sherman, ESQ
62 Street Address (P.O. Box Number is Not Acceptable): 218 Almeria Avenue
83
84 City: Coral Gables — FL — 85 Zip Code: 33134

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Thomas G. Sherman ESQ — DATE: 9/15/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	President ☐ DELETE	1.1 TITLE	V.P. ☐ Change ☒ Addition
NAME	Camilo M. Jaime	1.2 NAME	Camilo M. Jaime
STREET ADDRESS	15476 NW 77th Ct. Suite 338	1.3 STREET ADDRESS	15476 NW 77th Ct. Suite 338
CITY-ST-ZIP	Miami, Fla 33016	1.4 CITY-ST-ZIP	Miami, Fla 33016
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	600002646826
STREET ADDRESS		5.3 STREET ADDRESS	-09/23/98--01015--030
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***550.00
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	9.22
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E034 (5/98)

14. I 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.

SIGNATURE: [signature] President 9/15/98 (305) 5[illegible]-8696