FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAR 31 AM 11: 03

DOCUMENT # P94000074048 (7)

1. Corporation Name
UNITED HOMES INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
201 SOUTH BISCAYNE BLVD. STE. 900 MIAMI FL 33131	201 SOUTH BISCAYNE BLVD. STE. 900 MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/05/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 7975 N.W. 154th ST.	26 7975 N.W. 154th ST.
Suite, Apt. #, etc: 22 SUITE 400	Suite, Apt. #, etc: 27 SUITE 400
City & State: 23 MIAMI LAKES FL.	City & State: 28 MIAMI LAKES FL.
Zip: 24 33016 Country: 25 U.S.A.	Zip: 29 33016 Country: 30 U.S.A.

4. FEI Number: 65-0531284 ☐ 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 has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

GREENE, STEVEN
201 SOUTH BISCAYNE BLVD. STE. 900
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 ______________________ DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	GREENE, MICHAEL S
STREET ADDRESS	201 SOUTH BISCAYNE BLVD. STE. 900
CITY-ST-ZIP	MIAMI FL 33131

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C, T, S	☒ Change ☐ Addition
1.2 NAME	MISARES, ANTHONY	
1.3 STREET ADDRESS	7975 N.W. 154th ST. SUITE 400	
1.4 CITY-ST-ZIP	MIAMI LAKES, FL. 33016	
2.1 TITLE	P	☐ Change ☒ Addition
2.2 NAME	CARDOSO SILVIO A.	
2.3 STREET ADDRESS	7975 N.W. 154th ST. SUITE 400	
2.4 CITY-ST-ZIP	MIAMI LAKES, FL. 33016	
3.1 TITLE	VP	☐ Change ☒ Addition
3.2 NAME	BRIELE, ROBERT	
3.3 STREET ADDRESS	7975 N.W. 154th ST. SUITE 400	
3.4 CITY-ST-ZIP	MIAMI LAKES, FL. 33016	
4.1 TITLE		☐ Change ☐ Addition
5.1 TITLE		☐ Change ☐ Addition
6.1 TITLE		☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Robert Briele (signature)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
ROBERT BRIELE

Date: 3/27/95
Daytime Phone #: 305-558-2600

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