

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT.
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

96 SEP -3 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P95000041999(0)**
1. Corporation Name
HOME SELLERS & BUYERS, INC.

Principal Place of Business Mailing Address
**108 ROBIN RD. STE 1010
ALTAMONTE SPRINGS FL
32701**

3. Date Incorporated or Qual. Fee
5/24/95

3a. Date of Last Report
N/A

2. Principal Place of Business
21 **108 ROBIN ROAD**

2a. Mailing Address
26 **108 ROBIN ROAD**

Suite, Apt. #, etc.
22 **Suite 1010**

Suite, Apt. #, etc.
27 **Suite 1010**

City & State
23 **ALTAMONTE SPR., FL.**

City & State
28 **ALTAMONTE SPR., FL.**

Zip
24 **32701**

Country
25 **U.S.A.**

Zip
29 **32701**

Country
30 **U.S.A.**

4. FET Number

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 taxes under s. 189.032, Florida Statutes.

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**O'NEILL PERALTA
901 ALFRED DRIVE
ORLANDO FL. 32810**

81 Name
O'NEILL PERALTA
82 Street Address (P.O. Box Number is Not Acceptable)
901 ALFRED DRIVE
83
84 City
ORLANDO

FL 85 Zip Code
32810

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

[Signature]

8/14/96

12. OFFICERS AND DIRECTORS

TITLE	☒ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

11 TITLE	☐ Change ☒ Addition
12 NAME	PRESIDENT
13 STREET ADDRESS	O'NEILL PERALTA
14 CITY, ST, ZIP	901 ALFRED DRIVE
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY, ST, ZIP	

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****293.75 ****293.75**

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report or supplementary annual report is true and accurate and that my signature shall have the same legal effect as if made and attested by the officer or officers named in the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report or on a attachment with an address.

SIGNATURE: *[Signature]* **O'NEILL PERALTA**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/14/96 (407) 834-7653

CR2E034 (3/96)