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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000060452 (6)

CUSTOM FLORIDA HOMES, INC.

Principal Place of Business Mailing Address 14425 COUNTRY WALK DRIVE 14425 COUNTRY WALK DRIVE MIAMI FL 33186 MIAMI FL 33186 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/04/1995 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0602197 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zω Country 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. TUYES 25 29 30 □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HARRIS, ELLIOTT SIXTH FLOOR MCCORMICK BLDG. 82 Street Address (P.O. Box Number is Not Acceptable) 111 S.W. 3RD STREET 83 MIAMI FL 33130 64 City 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 Signature, typed or printed name of registerest agent and title if applicable (NOTE: Registered Agent eignature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change Addition 1 1 TeTLE GARCIA-CARRILLO, PEDRO NAME 1 2 NAME 14425 COUNTY WALK DR. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33186 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Addition HARRIS, ELLIOTT NAME 2.2 NAME 111 S.W. 3RD STREET, 6TH FLOOR STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33130** CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE ☐ Addition TITLE 3.1 TITLE Change 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 ADORESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE 5 1 TITLE ☐ Change ___ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 City-ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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:

Ecciore Harry Seels 1/20/

1/20/88 30/28-0

FILED

Feb 17 1998 8:00am

Secretary of State

CR2E034 (10/97)