2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000000475

1. Entity Name

RESÚLTS HOMEBUYERS OF MELBOURNE, INC.



FILED Feb 05, 2007 08:00 AM Secretary of State

Principal Place of Business 8940 S. TROPICAL TRAIL MERRITT ISLAND, FL 32952 Mailing Address

P.O. BOX 360983

MELBOURNE, FL 32936-0983



DO NOT WRITE IN THIS SPACE

01282007 No Chg-P CR2E034 (11/05)

 4. FEI Number
 Applied For

 59-3353224
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SOUZA, JOSEPH A 8940 S. TROPICAL TRAIL MERRITT ISLAND, FL 32952

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PCEO SOUZA, JOSEPH A 8940 S. TROPICAL TRAIL MERRITT ISLAND, FL 32952	TORS			U00000621210 02/12/07-80007-023 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE Name Street address City-St-Zip				IN [*]	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #