

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000052186

Entity Name: HOMA SUPPLIES, INC.

FILED  
Apr 28, 2006  
Secretary of State

## Current Principal Place of Business:

1000 PONCE DE LEON  
SUITE 305  
CORAL GABLES, FL 33134 US

## New Principal Place of Business:

## Current Mailing Address:

1000 PONCE DE LEON  
SUITE 305  
CORAL GABLES, FL 33134 US

## New Mailing Address:

FEI Number: 65-0674605      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

REYES-LOVIO, JOSEFINA  
12367 SW 140 ST  
MIAMI, FL 33186 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: REYES-LOVIO, JOSEFINA  
Address: 12367 SW 140 ST  
City-St-Zip: MIAMI, FL 33186

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEFINA REYES-LOVIO

PD

04/28/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date