2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000076587

Entity Name: POINCIANA HOMES OF BROWARD, INC.

FILED Jan 07, 2009 Secretary of State

Current Principal Plac	e of Business:	New Princi	pal Place of Business

3971 SW 8TH ST 3971 SW 8TH ST STE 205 STE 205

MIAMI, FL 33134 US MIAMI, FL 331342950 US

Current Mailing Address: New Mailing Address:

3971 SW 8TH ST. . 3971 SW 8TH ST

STE 205 STE 205

MIAMI, FL 33134 US MIAMI, FL 331342950 US

FEI Number: 65-0692725 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GONZALEZ, NITZA
3971 SW 8 ST SUITE 205
TWO SOUTH BISCAYNE BOULEVARD
GONZALEZ, NITZA
3971 SW 8 ST
SUITE 205
SUITE 205

MIAMI, FL 33134 US MIAMI, FL 331342950 US

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: 01/07/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD () Delete Title: PTD (X) Change () Addition

Name: LARRIEU, MANUEL A
Address: 3971 S.W. 8TH STREET, SUITE 205
Address: 3971 S.W. 8TH STREET, SUITE 205

Address: 3971 S.W. 8TH STREET, SUITE 205 Address: 3971 S.W. 8TH STREET, SUITE 205
City-St-Zip: CORAL GABLES, FL 331342950 US

Title: VSD () Delete Title: VSD (X) Change () Addition

Name: LARRIEU, JORGE A Name: LARRIEU, JORGE A

 Address:
 3971 S.W. 8TH STREET, SUITE 205
 Address:
 3971 S.W. 8TH STREET, SUITE 205

 City-St-Zip:
 CORAL GABLES, FL
 City-St-Zip:
 CORAL GABLES, FL 331342950 US

Title: AS () Delete Title: AS (X) Change () Addition

 Name:
 GONZALEZ, NITZA
 Name:
 GONZALEZ, NITZA

 Address:
 3971 SW 8TH ST STE 205
 Address:
 3971 SW 8TH ST STE 205

City-St-Zip: CORAL GABLES, FL City-St-Zip: CORAL GABLES, FL 331342950 US

I hereby certify that the information supplied with this filing does not qualify 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: MANUEL A LARRIEU P 01/07/2009