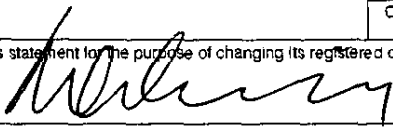
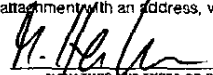
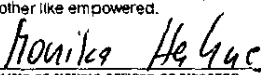


**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90244 033 ***150.00

DOCUMENT # P97000000979					
1. Entity Name SOUTHWEST FLORIDA DREAM HOMES, INC.					
Principal Place of Business 3032 SW 22ND PLACE CAPE CORAL, FL 33914 US			Mailing Address 3032 SW 22ND PLACE CAPE CORAL, FL 33914 US		
2. Principal Place of Business 2634 SW 54th Ter. Suite, Apt. #, etc.			3. Mailing Address 2634 SW 54th Ter Suite, Apt. #, etc.		
City & State Cape Coral, FL		City & State Cape Coral, FL		4. FEI Number 65-0719588	
Zip 33914	Country USA	Zip 33914	Country USA	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RICCIANI, RICHARD R 6371-4 PRESIDENTIAL COURT FT. MYERS, FL 33919				7. Name and Address of New Registered Agent Name Hans Peter Hahues Street Address (P.O. Box Number is Not Acceptable) 2634 SW 54th Ter. City Cape Coral FL Zip Code 33914	
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:  3-25-03 Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAHUES, HANS PETER 3032 SW 22ND PLACE CAPE CORAL, FL 33914 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 2634 SW 54th Ter. Cape Coral, FL 33914	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAHUES, MONIKA 3032 SW 22ND PLACE CAPE CORAL, FL 33914 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 2634 SW 54th Ter. Cape Coral, FL 33914	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. 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 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:  			3-25-03 239-549-0191		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		

11017168



☒ CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)