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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000041986 (5) **DOCUMENT #**

HOMEBUILDERS INVESTMENTS, INC.

Principal Place of Business

officer or director of the Block 12 or Block 13 is

Mailing Address

FILED Feb 20 1998 8:00am Secretary of State



7900 MIAMI LAKES DRIVE WEST 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES FL 33016 MIAMI LAKES FL 33016 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 05/12/1997 2a. Mailing Address 2. Principal Place of Business Applied For 7520 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes Пио 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MEYER, THOMAS H 7900 MIAMI LAKES DRIVE WEST 62 Street Address (P.O. Box Number is Not Acceptable) MIAMI LAKES FL 33016 83 City 85 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 registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Champe Addition D/P MEYER, THOMAS H NAME 1.2 NAME 7900 MIAMI LAKES DRIVE WEST STREET ADDRESS 1.3 STREET ADDRESS MIAMI LAKES FL 33016 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change Addition 21 TITLE WHEELER, BRIAN M NAME 2.2 NAME 7900 MIAMI LAKES DRIVE WEST STREET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL 33016 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change Addition 3.1 TITLE Linda £. Barrocas NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 7900 Miami Lakes Drive West Miami Lakes, FL 33016 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE V/T NAME 4.2 NAME Concepcion Queralt STREET ADDRESS 4.3 STREET ADDRESS same as above CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME Sylvia L. Ponce STREET ADDRESS 5.3 STREET ADDRESS same as aboove 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 CITY-ST-ZIP 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in