2004 FOR PROFIT CORPORATION ....

SIGNATURE:

DOCUMENT # P97000047015  1. Entity Name ENGINEERED HOMES OF ORLANDO, INC.								Jan 29, 2004 03 Secretary of			l
Principal Place 1155 S SEM STE 1120 WINTER PAI	ORAN BLV	1155 STE	Mailing Address 1155 S SEMORAN BLVD STE 1120 WINTER PARK FL 32792								
2. Principal P		3. Mailing Address									
Suite, Apt		Suite. Apt. #, etc					MOORE CR2E0	34 (1	·	·	
City & Stati	е		City & State				4.	FEI Number 59-3456490			hed For Applicable
Zip Country			Zip Co			try	5. Certificate of Status Desired See Requirements				
6. Name and Address of Current R							7. Name and Address of New Registered Agent				
TEPLITSKY, IGOR 1155 S SEMORAN BLVD STE 1120						Name Street Address (P.O. Box Number is Not Acceptable)					
WINTER PARK FL 32792						City			- 2	Zip Code	
the obligat	tions of regis					}		gent, or both, in the State of Florida. 1 i		··	
After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State								Election Campaign Financing     Trust Fund Contribution.		Ádded	May Be to Fees
10.	STD	OFFICERS AN	DIRECTO	DRS Delete	11.		AI	DDITIONS/CHANGES TO OFFICERS A		RECTORS   Change	N 11  ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TEPLITSK 1155 S SE	Y, LILIAN MORAN BLVD, SUITE PARK FL 32792	1120	NAN Stri		1		000000020536 01/29/04-80070-009 158.75			
TIFLE NAME STREET ADDRESS CITY-ST-ZIP	5	VEN F MORAN BLVD, SUITE ARK FL 32792	1120	☐ Delete		{				Change	☐ Addition
BILE NAME STREET ADDRESS CITY - ST- ZIP	1	Y, IGOR MORAN BLVD STE 11. ARK FL 32792	20	☐ Delete	•					Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3	ENNIS EMORAN BLVD. STE. 1 PARK FL 32792	120	☐ Delete						Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		{				] Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete	CHT	ME EET ADDRESS Y-ST-ZIP				] Change	Addition
12. I hereby indicated of the co-changed	certify that the don this report poration or i, or on an at	ne information supplied word or supplemental report the receiver or trustee emtachment with an address	ith this filing is true and powered to b, with all of	g does not qualify for accurate and that be execute this report the like empowered	or the ext my signa it as required	emption stated in ature shall have a aired by Chapter	n Section the same 607, Flo	n 119.07(3)(i), Florida Statutes, i further e legal effect as if made under oath; th urida Statutes, and that my name appe	certify at i am ars in B	that the ir an officer lock 10 or	dormation or director Block 11 if

**FILED**