2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# P97000064124

Entity Name: FIRST OF HOMESTEAD INVESTMENTS, INC.

Current Principal Place of Business:

1550 N. KROME AVE.
HOMESTEAD, FL 330303233

New Principal Place of Business:

Current Mailing Address:

1550 N. KROME AVE.
HOMESTEAD, FL 330303233

New Mailing Address:

FEI Number: 65-0773791 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PEYTON, DAVID A
1550 N. KROME AVE.
HOMESTEAD, FL 330303233 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: P ( ) Delete
Name: PEYTON, DAVID A
Address: 148 NE 18 STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: VT ( ) Delete
Name: ARES, ROBERT
Address: 55 NE 18 STREET
City-St-Zip: HOMESTEAD, FL 33030

Title: S ( ) Delete
Name: DE LEON, DAWNA
Address: 700 NE 13 STREET
City-St-Zip: HOMESTEAD, FL 33030

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: PEYTON, DAVID A
Address: 1550 N KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: VT (X) Change ( ) Addition
Name: ARES, ROBERT
Address: 1550 N KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

Title: S (X) Change ( ) Addition
Name: DE LEON, DAWNA
Address: 1550 N KROME AVE
City-St-Zip: HOMESTEAD, FL 33030

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: ROBERT ARES VT 04/21/2009

Electronic Signature of Signing Officer or Director — Date