

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000020247

1. Corporation Name

FIRST BANKERS LUXURY HOMES, INC.

Principal Place of Business

1515 SOUTH FEDERAL HWY., STE. 300
C/O GILLESPIE & ALLISON, P.A.
BOCA RATON FL 33432

Mailing Address

1515 SOUTH FEDERAL HWY., STE. 300
C/O GILLESPIE & ALLISON, P.A.
BOCA RATON FL 33432

2. Principal Place of Business

21 Suite, Apt #, etc
22 City & State
23 Zip Country
24

2a. Mailing Address

26 Suite, Apt #, etc
27 City & State
28 Zip Country
29

9. Name and Address of Current Registered Agent

GILLESPIE, R. BOWEN III
1515 SOUTH FEDERAL HWY., STE. 300
C/O GILLESPIE & ALLISON, P.A.
BOCA RATON FL 33432

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 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 (if applicable)

(If the Registered Agent signs, check one of the following.)

Date

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	GILLESPIE, R. BOWEN	
STREET ADDRESS	1515 SOUTH FEDERAL HWY., STE. 300	
CITY-STATE-ZIP	BOCA RATON FL 33432	
TITLE	Blank	[] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		[] DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13.

11 TITLE	
12 NAME	
13 STREET ADDRESS	
14 CITY-STATE-ZIP	
21 TITLE	
22 NAME	
23 STREET ADDRESS	
24 CITY-STATE-ZIP	
31 TITLE	
32 NAME	
33 STREET ADDRESS	
34 CITY-STATE-ZIP	
41 TITLE	
42 NAME	
43 STREET ADDRESS	
44 CITY-STATE-ZIP	
51 TITLE	
52 NAME	
53 STREET ADDRESS	
54 CITY-STATE-ZIP	
61 TITLE	
62 NAME	
63 STREET ADDRESS	
64 CITY-STATE-ZIP	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[] Change [] Addition
100002887801-4
-05/26/99 - 01105-022
*****550.00 *****550.00
[] Change [X] Addition
PRESIDENT
VINCENT L. MURATORE
1700 N.W. 64TH STREET
FT. LAUDERDALE, FLA. 33309
VICE-PRES SEC. [] Change [X] Addition
KARL PELANZER
1700 N.W. 64TH STREET
FT. LAUDERDALE, FLA. 33309
[] Change [] Addition
100002887801-4
-05/26/99 - 01105-022
*****8.75 *****8.75
[] Change [] Addition
[] Change [] Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b) 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

100

Original - Please Retain

03-0026

CR2E034 (11/98)