

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000040846

FILED
Apr 21, 2002 8:00 AM
Secretary of State

Entity Name: THE HOME INVESTORS CORPORATION

Current Principal Place of Business:

230-174TH STREET
SUITE 709
MIAMI BEACH, FL 33160

New Principal Place of Business:

230-174TH STREET
SUITE 709
SUNNY ISLES, FL 33160

Current Mailing Address:

PO BOX 260248
PEMBROKE PINES, FL 33026

New Mailing Address:

FEI Number: 65-0832597

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOGRADI, PETER
230 174TH STREET APT#709
MIAMI BEACH, FL 33160

Name and Address of New Registered Agent:

NOGRADI, PETER
230 174TH STREET APT#709
SUNNY ISLES, FL 33160

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

04/21/2002

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: NOGRADI, PETER
Address: 230-174TH STREET
City-St-Zip: MIAMI BEACH, FL 33160

Title: SVD () Delete
Name: NOGRADI, ODALYS
Address: 230-174TH STREET
City-St-Zip: MIAMI BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: NOGRADI, PETER
Address: 230-174TH STREET
City-St-Zip: SUNNY ISLES, FL 33160

Title: SVD (X) Change () Addition
Name: NOGRADI, ODALYS
Address: 230-174TH STREET
City-St-Zip: SUNNY ISLES, FL 33160

I hereby certify that the information supplied with this filing does not qualify for the 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 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: PETER NOGRADI

Electronic Signature of Signing Officer or Director

PRES

04/21/2002

Date