

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

FILED  
Feb 22, 1999 8:00 am  
Secretary of State

02-22-1999 90102 024 \*\*\*158.75

DOCUMENT # P98000085917

1. Corporation Name  
HOME GROUP, INC.

Principal Place of Business  
8279 N.W. 36TH ST.  
SUNRISE FL 33351

Mailing Address  
8279 N.W. 36TH ST.  
SUNRISE FL 33351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/05/1998

4. FEI Number

65-0874218

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

□

Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

□ Yes

X No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

BUDHRAM, DANA  
8279 N.W. 36TH ST.  
SUNRISE FL 33351

10. Name and Address of New Registered Agent

81 Name Dana BUDHRAM

82 Street Address (P.O. Box Number is Not Acceptable)  
8279 NW 36 Street

83

84 City Sunrise FL

85 Zip Code 33351

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]* Dana Budhram

1-5-99

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME BUDHRAM, DANA  
STREET ADDRESS 8279 N.W. 36TH ST.  
CITY-ST-ZIP SUNRISE FL 33351

TITLE VPD  
NAME BUDHRAM, SHASTRI J  
STREET ADDRESS 8279 N.W. 36TH ST.  
CITY-ST-ZIP SUNRISE FL 33351

TITLE TD  
NAME CHUNULAL, AMRIT  
STREET ADDRESS 8279 N.W. 36TH ST.  
CITY-ST-ZIP SUNRISE FL 33351

TITLE SD  
NAME ABRAHAM, ALEX  
STREET ADDRESS 7419 N.W. 34TH ST.  
CITY-ST-ZIP LAUDERHILL FL 33319

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BUDHRAM, SHASTRI 1/4/99

94-730-9277

Date

Daytime Phone #

03/24/95

CR2E034 (11/98)