

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000006017

FILED  
Apr 20, 2004  
Secretary of State

**Entity Name:** UNITED HOMES AT EMERALD LAKES, INC.

**Current Principal Place of Business:**

7975 NORTHWEST 154TH STREET  
SUITE #400  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

7975 NORTHWEST 154TH STREET  
SUITE #400  
MIAMI LAKES, FL 33016

**New Mailing Address:**

**FEI Number:** 65-0999465      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HODKIN, PETER M  
2101 WEST COMMERCIAL BLVD.  
SUITE 4100  
FORT LAUDERDALE, FL 33309 US

**Name and Address of New Registered Agent:**

BRIELE, ROBERT T  
7975 NW 154 STREET  
SUITE 400  
MIAMI LAKES, FL 33016 US

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: ROBERT BRIELE

04/20/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: SC      ( ) Delete  
Name: MIJARES, ANTHONY JR.  
Address: 7975 NORTHWEST 154TH STREET  
City-St-Zip: MIAMI LAKES, FL 33016

Title: DP      ( ) Delete  
Name: CARDOSO, SILVIO JR.  
Address: 7975 NORTHWEST 154TH STREET  
City-St-Zip: MIAMI LAKES, FL 33016

Title: V      ( ) Delete  
Name: BRIELE, ROBERT  
Address: 7975 NW 154TH ST., SUITE 400  
City-St-Zip: MIAMI LAKES, FL 33016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ROBERT BRIELE

V

04/20/2004

Electronic Signature of Signing Officer or Director

Date