2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED Oct 21, 2004

DOCUM	EN 1# P99	9000027926		Secretary of State	
Entity Nan	ne: LAKES E	EDGE HOMES HOLDINGS, INC).		
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1 ODELL P YONKERS,					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
1 ODELL P YONKERS,					
FEI Number:	65-0911940	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of (Current Registered Agent:	Name and Address o	f New Registered Agent:	
KLEIN, SHAMIRA ESQ. C/O BERMAN WOLFE & RENNERT, P.A. 100 S.E. 2ND ST. SUITE 3500 MIAMI, FL 331312130 US			100 S.E. 2ND ST. SUI	REGISTERED AGENT OF FLORIDA, LLC 100 S.E. 2ND ST. SUITE 2900 MIAMI, FL 33131 US	
The above in the State	named entity of Florida.	submits this statement for the p	urpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: SHAMIRA KLEIN, VP				10/21/2004	
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (MACFARLANE 1 ODELL PLZ YONKERS, NY		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (CHOWDHURY 1 ODELL PLZ YONKERS, NY	,	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: KARIM CHOWDHURY 10/21/2004 D