

The Law Offices of Loretta Simon, P.A.
P.O. BOX 347226
Corol Calples Florida 23224

CR2E031(7/97)

RPORATION NAME(S) & DOCUM	Office Use Only  ENT NUMBER(S) (if known):
PROPORATION NAME(S) & DOCUM	EIAI MOMBER(2), (II knomi).
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(Corporation Name)	(Document #)
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Profit Not for Profit	Amendment  Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent Dissolution/Withdrawal
Domestication	Dissolution/Withdrawal Merger  O  Merger
Other	
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership Reinstatement
	Trademark
	Other

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State ofFlorida_
submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Dream Homes Real Estate Company
2. The mailing address of the corporation: 8249 N.W. 36 St., Ste. 214
Miami, FL 33166
3. Date of incorporation/qualification: 4/12/99 Document number: P99000034003
4. The name and address of the current registered agent and office:
3485 West Flagler St., Ste. 500
Miami, FL 33135
5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  (P. O. Box Not Acceptable)
8249 N.W. 36 St., Ste. 214
Miami, FL 33166
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
(Signature of an officer, chairman or vice chairman of the board)  (Date)
Loretta Simon, President
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
- Jour 5/30/01
(Signature of Registered Agent) (Date)  If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

CR2E045(9/00)