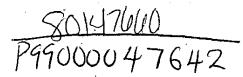
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

	003 FOR PROFIFORM BUSIN			FILED Sep 12, 2003 8:00 am
DOCU 1. Entity Nam		00047642		Secretary of State 09-12-2003 90099 039 ***150.00
	D HOMES & DEVELOPME	NT, INC.		
Principal Place of Business 516 HARBOUR ROAD NORTH PALM BEACH FL 33408 Mailing Address 516 HARBOUR ROAD NORTH PALM BEACH FL 33408			3408	
2. Principal F	Place of Business	3. Mailing Address	<u>-</u> -	- LIQQAABOLSIO (QAABIILII TOILI BUIKI QOAA BUIKI BUIKI OLULI IUGU BUIKI OLULI OLULU IUGU IUGU BUIKI OLULU OLULU IUGU IUGU IUGU IUGU IUGU IUGU IUGU
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES
City & State		City & State		4. FEI Number 65-0922080 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired S8.75 Additional Fee Required
	6. Name and Address of Currer	nt Registered Agent		7. Name and Address of New Registered Agent
SPIEGEL	& UTRERA, P.A.		Name	
343 ALMERIA AVENUE			Street Address	(P.O. Box Number is Not Acceptable)
CORAL G	ABLES FL 33134	,	City	FL Zip Code
	e named entity submits this statement tions of registered agent. Signature, typed or printed name of registered age		egistered office or registe Registered Agent signature require	ered agent, or both, in the State of Florida. I am familiar with, and accept
After Se	ILE NOW!!! FEE IS \$550.00 ptember 10, 2003 Fee will be \$7! k Payable to Florida Department			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.	OFFICERS AN	D DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD FOWLER, BARRY D 516 HARBOUR ROAD NORTH PALM BEACH FL 3340	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		Delete.	NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS	Change Addition
CITY-ST-ZIP TITLE NAME		Delete	CITY-ST-ZIP TITLE NAME	☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS	·	☐ Delete	TITLE NAME STREET ADDRESS	☐ Change ☐ Addition
12. I hereby of indicated of the corrichanged,	certify that the information supplied w on this report or supplemental report poration or the receiver or truster em or on an attachment with an appress	th this filing does not qualify for t is true and accurate and that my oowered to execute this report as with all other live proposed of	he exemption stated in S signature shall have the s required by Chapter 60	ection 119.07(3)(i), Florida Statutes. I further certify that the information same legal effect as if made under oath; that I am an officer or director 7, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE:

(561)



516 Harbour Road North Palm Beach, FL 33408 (561) 842-6850 FAX (561) 863-2375

9-6-03

Florida Department of State Division of Corporations

Sear Sins:

That not received

The prior notice of filing

Any prior notice of filing

Allese waine the late fee

Enclosed is my thech for

Enclosed is my thech for

this years filing (\$150.00).

Jany Jamble