

**2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)**

**FILED**  
**Jan 31, 2005 8:00 am**  
**Secretary of State**

01-31-2005 90047 002 \*\*\*150.00



**DOCUMENT # V29932**  
 1. Entity Name  
 HOUSING CONCEPTS, INC.

Principal Place of Business      Mailing Address  
 22341 SW 66 AVE      22341 SW 66 AVE  
 SUITE 1207      SUITE 1207  
 BOCA RATON FL 33428      BOCA RATON FL 33428  
 US      US

2. Principal Place of Business      3. Mailing Address  
 22317 SW 66 AVE      22317 SW 66 AVE  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
 SUITE 2304      SUITE 2304

City & State      City & State  
 BOCA RATON, FL      BOCA RATON, FL  
 Zip      Zip  
 33428      33428  
 Country      Country  
 LISA      LISA

1st MOORE      CR2E034 (10/04)  
 4. FEI Number      Applied For  
 65-0328982      Not Applicable  
 5. Certificate of Status Desired      \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
 FRIEDMAN, DAVID  
 22341 SW 66 AVE  
 SUITE 1207  
 BOCA RATON FL 33428

7. Name and Address of New Registered Agent  
 Name      DAVID FRIEDMAN  
 Street Address (P.O. Box Number is Not Acceptable)  
 22317 SW 66 AVE  
 SUITE 2304  
 City      BOCA RATON      FL      Zip      33428

8. 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. I am familiar with, and accept the obligations of registered agent.  
 SIGNATURE \_\_\_\_\_ (NOTE Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May-1, 2005 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.      \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> Delete
NAME	FRIEDMAN, DAVID	
STREET ADDRESS	22341 SW 66 AVE SUITE 1207	
CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE	VP	<input type="checkbox"/> Delete
NAME	DALTON, JOHN W	
STREET ADDRESS	22341 SW 66 AVE SUITE 1207	
CITY-ST-ZIP	BOCA RATON FL 33428	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	U.P.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT F. CENTORE	
STREET ADDRESS	22317 SW 66 AVE SUITE 2304	
CITY-ST-ZIP	BOCA RATON, FL 33428	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David Friedman      DAVID FRIEDMAN      1/25/05      715-1717  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #