


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90028 001 ***150.00

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



Principal Place of Business Mailing Address
 22317 SOUTHWEST 66 AVENUE 22317 SOUTHWEST 66 AVENUE
 SUITE 2304 SUITE 2304
 BOCA RATON FL 33428 BOCA RATON FL 33428
 US US



2. Principal Place of Business 3. Mailing Address
 22305 SW 57 Ave 22305 SW 57 Ave
 Suite, Apt #, etc. Suite, Apt #, etc.
 Suite 201 Suite 201

1st MOORE CR2E034 (10/05)

City & State City & State
 Boca Raton, FL Boca Raton FL
 Zip Country Zip Country
 33428 USA 33428 USA

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
 22317 SOUTHWEST 66 AVENUE
 SUITE 2304
 BOCA RATON FL 33428

7. Name and Address of New Registered Agent
 Name: Friedman, DAVID
 Street Address (P.O. Box Number is Not Acceptable)
 22305 SW 57 Ave
 Suite 201
 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: *David Friedman, Pres* DAVID FRIEDMAN 2/17/06
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00.
After May 1, 2006 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing \$5.00 May Be
 Trust Fund Contribution. 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	CENTORE, ROBERT F	
STREET ADDRESS	22317 SOUTHWEST 66 AVENUE STE 2304	
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		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRIEDMAN DAVID	
STREET ADDRESS	22305 SW 57 AVE SUITE 201	
CITY-ST-ZIP	BOCA RATON, FL 33428	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN DALTON	
STREET ADDRESS	22305 SW 57 AVE SUITE 201	
CITY-ST-ZIP	BOCA RATON, FL 33428	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CENTORE, ROBERT F.	
STREET ADDRESS	22305 SW 57 AVE SUITE 201	
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		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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, Pres* DAVID FRIEDMAN 2/17/06 715-1717 361
Signature and typed or printed name of signing officer or director Date Daytime Phone #