

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 23, 2006 8:00 am
Secretary of State

05-23-2006 90010 041 ***150.00



DOCUMENT # P04000028821
 1. Entity Name
MORTGAGES BY COSTAMAR, INC.

Principal Place of Business Mailing Address
1421 E. OAKLAND PARK BLVD. **1421 E. OAKLAND PARK BLVD.**
FT. LAUDERDALE, FL 33334 US **FT. LAUDERDALE, FL 33334 US**

2. Principal Place of Business 3. Mailing Address
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

05112006 Chg-P CR2E034 (11/05)
 4. FEI Number Applied For
20-0734409 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**



6. Name and Address of Current Registered Agent
CONCAS, GERARDO
1421 E. OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33334

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____
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
Due by September 6, 2006

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONCAS, GERARDO	NAME	
STREET ADDRESS	1421 E. OAKLAND PARK BLVD.	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33334	CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERNANDEZ, JOSEPH M	NAME	
STREET ADDRESS	1421 E. OAKLAND PARK BLVD.	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33334	CITY-ST-ZIP	
TITLE	SECR <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONCAS, VIOLETA	NAME	
STREET ADDRESS	1421 E. OAKLAND PARK BLVD.	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33334	CITY-ST-ZIP	
TITLE	TRES <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FERNANDEZ, RUTH	NAME	
STREET ADDRESS	1421 E. OAKLAND PARK BLVD.	STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE, FL 33334	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: *gjs* 5/18/06 952-646-5948
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #