

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000063838

FILED
Feb 11, 2004
Secretary of State

Entity Name: IDEAL MORTGAGE SOLUTIONS CORPORATION

Current Principal Place of Business:

499 NTH SR 434
SUITE 1053
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

499 NTH SR 434
SUITE 1053
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 59-3589047

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GONZALEZ, GEORGE LUIS
1266 YVONNE STREET
APOPKA, FL 32712

Name and Address of New Registered Agent:

GONZALEZ, GEORGE LUIS
1257 YVONNE STREET
APOPKA, FL 32712

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.

SIGNATURE:

02/11/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PMC () Delete
Name: GONZALEZ, GEORGE LUIS
Address: 1266 YVONNE STREET
City-St-Zip: APOPKA, FL 32712

Title: DST () Delete
Name: GONZALEZ, CAROLYN V
Address: 1266 YVONNE STREET
City-St-Zip: APOPKA, FL 32712

Title: DV () Delete
Name: NARVAEZ, STEVEN
Address: 1266 YVONNE STREET
City-St-Zip: APOPKA, FL 32712

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PMC (X) Change () Addition
Name: GONZALEZ, GEORGE LUIS
Address: 1257 YVONNE STREET
City-St-Zip: APOPKA, FL 32712

Title: DST (X) Change () Addition
Name: GONZALEZ, CAROLYN V
Address: 1257 YVONNE STREET
City-St-Zip: APOPKA, FL 32712

Title: DV (X) Change () Addition
Name: NARVAEZ, STEVEN
Address: 760 MAGNOLIA CREEK CIRCLE
City-St-Zip: ORLANDO, FL 32828

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROLYN V. GONZALEZ

DST

02/11/2004

Electronic Signature of Signing Officer or Director

Date