


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P01000079784			
1. Entity Name MORTGAGE CAPITAL CORP.			
Principal Place of Business 11231 JASMINE HILL CIR. BOCA RATON, FL 33498		Mailing Address 11231 JASMINE HILL CIR. BOCA RATON, FL 33498	
2. Principal Place of Business 19528 SATURNIA LAKES DR Suite, Apt. #, etc.		3. Mailing Address 19528 SATURNIA LK DR Suite, Apt. #, etc.	
City & State BOCA RATON, FL Zip 33498		City & State BOCA RATON, FL Zip 33498	
Country PALM BEACH		Country PALM BEACH	
4. FEI Number 65-1129421		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BURATTINI, CARLOS O 11231 JASMINE HILL CIR. BOCA RATON, FL 33498		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		City	
FL		FL	
Zip Code		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURATTINI, CARLOS O	NAME	
STREET ADDRESS	11231 JASMINE HILL CIR.	STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL 33498	CITY-ST-ZIP	
TITLE	VD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURATTINI, ROXANNA	NAME	
STREET ADDRESS	11231 JASMINE HILL CIR.	STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL 33498	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	
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	

24046962



04062004 Chg-P CR2E034 (10/03)

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: *Carlos O. Buratti*

04-12-04