2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 13, 2008
Secretary of State

DOCUMENT# P02000097824

Entity Name: DAVOS MORTGAGE BANKERS, INC.

Current Principal Place of Business:

1001 BRICKELL BAY DR,
3104
MIAMI, FL 33131

New Principal Place of Business:

Current Mailing Address:

1001 BRICKELL BAY DR,
3104
MIAMI, FL 33131

New Mailing Address:

FEI Number: 03-0481210 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVOS FINANCIAL ADVISORS LLC
1001 BRICKELL BAY DR
3104
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P (X) Delete
Name: MARTIN, RAFAEL A
Address: 1001 BRICKELL BAY DR, STE #3104
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: OSIO, DAVID
Address: 1001 BRICKELL BAY DR, STE #3104
City-St-Zip: MIAMI, FL 33131

Title: D ( ) Delete
Name: SOTILLO, ANDRES
Address: 1001 BRICKELL BAY DR, STE #3104
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DR (X) Change ( ) Addition
Name: OSIO, DAVID
Address: 1001 BRICKELL BAY DR, STE #3104
City-St-Zip: MIAMI, FL 33131

Title: DR (X) Change ( ) Addition
Name: SOTILLO, ANDRES
Address: 1001 BRICKELL BAY DR, STE #3104
City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: DAVID OSIO DR 05/13/2008

Electronic Signature of Signing Officer or Director — Date