

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006092

FILED
Mar 30, 2009
Secretary of State

Entity Name: ANNA & DAVI MORTGAGE CORPORATION

Current Principal Place of Business:

135-49 LEFFERTS BOULEVARD
SUITES 102
SOUTH OZONE PARK, NY 11420

New Principal Place of Business:

Current Mailing Address:

135-49 LEFFERTS BOULEVARD
SUITES 102
SOUTH OZONE PARK, NY 11420

New Mailing Address:

FEI Number: 06-1757637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: TRINITY LAKE SINGH,
Address: 158-09 92ND STREET
City-St-Zip: HOWARD BEACH, NY 11414

Title: V () Delete
Name: SINGH, BHOJWATTIE
Address: 158-09 92ND STREET
City-St-Zip: HOWARD BEACH, NY 11420

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: TRINITY L. SINGH

DP

03/30/2009

Electronic Signature of Signing Officer or Director

Date