## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000007033

Entity Name: COMPLETE HOME MORTGAGE CORP.

FILED Jul 13, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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535 BROAD HOLLOW ROAD SUITE B9 740 VETERANS MEMORIAL HIGHWAY

MELVILLE, NY 11747 SUITE 200

HAUPPAUGE, NY 11788

**Current Mailing Address:** New Mailing Address:

535 BROAD HOLLOW ROAD SUITE B9 740 VETERANS MEMORIAL HIGHWAY MELVILLE, NY 11747

SUITE 200

HAUPPAUGE, NY 11788

FEI Number: 11-3235798 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC 2731 EXECUTIVÉ PARK DRIVE, SUITE 4 WESTON, FL 33331

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

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

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change ( ) Addition

KOUIMONIS, JOHN KOUIMANIS, JOHN Name: Name:

535 BROADHOLLOW RD STE. B9 Address: 740 VETERANS MEMORIAL HIGHWAY STE 200 Address:

City-St-Zip: MELVILLE, NY 11747 City-St-Zip: HAUPPAUGE, NY 11788

Title: VΡ Title: VΡ (X) Change ( ) Addition () Delete Name:

DUBE, GLENN Name: DUBE, GLENN

535 BROAD HOLLOW ROAD SUITE B9 Address: 740 VETERANS MEMORIAL HIGHWAY SUITE 200 Address:

HAUPPAUGE, NY 11788 MELVILLE, NY 11747 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutés. 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.

Ρ SIGNATURE: JOHN KOUIMANIS 07/13/2006