

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Nov 05, 2008
Secretary of State**

DOCUMENT# G42246

Entity Name: STREAMLINE MORTGAGE COMPANY, INC.

Current Principal Place of Business:

1140 W 50TH ST.
SUITE 307
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

1140 W 50TH ST.
SUITE 307
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 59-2627955 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ESTEVAN, ERNESTO O.
1140 W 50TH ST.
307
HIALEAH, FL 33012 US

Name and Address of New Registered Agent:

JOSEFA M ESTEVAN
1140 W 50TH ST.
307
HIALEAH, FL 33012 US

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: JOSEFA M. ESTEVAN 11/05/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: ESTEVAN, ERNESTO O.,
Address: 1140 W. 50 ST. #307
City-St-Zip: HIALEAH, FL 33012

Title: P (X) Delete
Name: ESTEVAN, JOSEFA M
Address: 1140 W 50TH ST #307
City-St-Zip: HAILEAH, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ESTEVAN, JOSEFA M
Address: 1140 W 50TH ST #307
City-St-Zip: HIALEAH, FL 33012

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: JOSEFA M. ESTEVAN P 11/05/2008
Electronic Signature of Signing Officer or Director Date