2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K65316

FILED Jan 12, 2006 Secretary of State

Entity Name: PENINSULA MORTGAGE BANKERS CORPORATION

Current Principal Place of Business: New Principal Place of Business:

9415 SUNSET DR. 2222 PONCE DE LEON BLVD.

STE. 111 SUITE M-200

MIAMI, FL 33172 US CORAL GABLES, FL 33134 US

Current Mailing Address: New Mailing Address:

9415 SUNSET DR. 2222 PONCE DE LEON BLVD.

STE. 111 SUITE M-200

MIAMI, FL 33172 US CORAL GABLES, FL 33134 US

FEI Number: 65-0099296 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:

LOPEZ-AQUIAR, HENRY A ESQ NATH, HELENA

9415 SUNSET DR. 2222 PONCE DE LEON BLVD. STE. 111-A SUITE M-200
MIAMI, FL 33173 US CORAL GABLES, FL 33134 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: HELENA NATH 01/12/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: RAWICZ, JORGE, Name: NATH, HELENA

Address: 9415 SUNSET DR. #111 Address: 2222 PONCE DE LEON BLVD., SUITE M-200

City-St-Zip: MIAMI, FL 33173 City-St-Zip: CORAL GABLES, FL 33134

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

 Name:
 NATH, HELENA
 Name:

 Address:
 9415 SW 72 ST SUITE 111
 Address:

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:

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

 Name:
 CEPERO, ELOY
 Name:

 Address:
 9415 SW 72 ST SUITE 111
 Address:

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:

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

 Name:
 CEPERO, ALÍNA
 Name:

 Address:
 9415 SW 72 ST SUITE 111
 Address:

 City-St-Zip:
 MIAMI, FL 33173
 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 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: HELENA NATH P 01/12/2006