

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000004144

FILED
Jan 13, 2004
Secretary of State

Entity Name: MAJESTIC MORTGAGE, LLC

Current Principal Place of Business:

1451 W. CYPRESS CREEK RD.
300
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

4171 W. HILLSBORO BLVD
9
COCONUT CREEK, FL 33073

Current Mailing Address:

1451 W. CYPRESS CREEK RD.
300
FORT LAUDERDALE, FL 33309

New Mailing Address:

4171 W. HILLSBORO BLVD
9
COCONUT CREEK, FL 33073

FEI Number: 81-0594538

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLICKER, MARK I
6688 PORTSIDE DRIVE
BOCA RATON, FL 333496 US

Name and Address of New Registered Agent:

FLICKER, MARK I
4075 BRIARCLIFF CIRCLE
BOCA RATON, FL 333496 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:

01/13/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: FLICKER, MARK I
Address: 6688 PORTSIDE DRIVE
City-St-Zip: BOCA RATON, FL 33496

Title: MGRM (X) Delete
Name: NEGRI, MICHAEL A
Address: 10775 QUEEN PALM COURT
City-St-Zip: BOCA RATON, FL 33498

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: FLICKER, MARK I
Address: 4075 BRIARCLIFF CIRCLE
City-St-Zip: BOCA RATON, FL 33496

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: MARK FLICKER

MGRM

01/13/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date