2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000047745

Entity Name: METROPOLITAN HOME LOANS, INC.

FILED Feb 23, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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5481 N. UNIVERSITY DR STE 102 CORAL SPRINGS, FL 33067

Current Mailing Address: New Mailing Address:

5481 N. UNIVERSITY DR STE 102 CORAL SPRINGS, FL 33067

FEI Number: 65-1015292 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:

RIOUX, RANDALL
5481 N. UNIVERSITY DR. SUITE 102
CORAL SPRINGS, FL 33067 US
BOCA RATON, FL 33431 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: STEPHEN M. BEYER 02/23/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name: RIOUX, RANDALL Name: RIOUX, RANDALL
Address: 5481N N. UNIVERSITY DR. #102 Address: 5481N N. UNIVERSITY DR. #102

Address: 548 IN N. UNIVERSITY DR. #102 Address: 548 IN N. UNIVERSITY DR. #102 City-St-Zip: CORAL SPRINGS, FL 33067 City-St-Zip: CORAL SPRINGS, FL 33067

Title: VP () Delete Title: VPS (X) Change () Addition Name: OLDBURY, PETE Name: OLDBURY, PETE

 Name:
 OLDBURY, PETE
 Name:
 OLDBURY, PETE

 Address:
 210 N. UNIVERSITY DR. #700
 Address:
 210 N. UNIVERSITY DR. #700

City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33071

Title: P () Delete Title: PDT (X) Change () Addition Name: FIELDS, MATTHEW Name: FIELDS, MATTHEW

 Address:
 210 N. UNIVERSITY DR. #102
 Address:
 210 N. UNIVERSITY DR. #102

 City-St-Zip:
 CORAL SPRINGS, FL 33071
 City-St-Zip:
 CORAL SPRINGS, FL 33071

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 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: MATTEW FIELDS P 02/23/2005