## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0000063543  1. Entity Name PERFORMANCE MORTGAGE INC.				
Principal Place 441-W DEARI ENGLEWOOD,	BORN STREET	Mailing Address 1151 LARCHIMONT DRIVE ENGLEWOOD, FL 34223		
D	O NOT WRITE I		CE	02102004 No Chg-P CR2E034 (10/03)  4. FEI Number
LEE, STEPHEN L 441-W DEARBORN STREET ENGLEWOOD, FL 34223				DO NOT WRITE IN THIS SPACE
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. I am familiar with, and accept the obligations of registered agent.  Signature  Signature  Signature optified when releasing.  DATE  DATE				
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00  **Election Campaign Financing				
10.	OFFICERS AND DIRE	CTORS		
TITLE NAME STREET ADDRESS CITY-SI-ZIP	PVP LEE, STEPHEN 1151 LARCHMONT DRIVE ENGLEWOOD, FL 34223			
NAME STREET ADDRESS CITY-SI-ZIP	ST LEE, STEPHEN 1151 LARCHMONT DRIVE ENGLEWOOD, FL 34223			
NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
TITLE NAME STREET ADDRESS C/TY-ST-ZIP				IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filing does not qualify 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 end that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.				
SIGNATURE: 2/11/04 (94) 473-7790  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date (94) 473-7790  Date (94) 473-7790				