

**2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Aug 18, 2005  
Secretary of State**

DOCUMENT# P01000008730

Entity Name: MORTGAGELINE CORPORATION

**Current Principal Place of Business:**

POST OFFICE BOX 172973  
HIALEAH, FL 33017

**New Principal Place of Business:**

15715 SOUTH DIXIE HIGHWAY  
SUITE 328  
MIAMI, FL 33157

**Current Mailing Address:**

POST OFFICE BOX 172973  
HIALEAH, FL 33017

**New Mailing Address:**

FEI Number: 65-1088422      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DUBOIS, LIBI  
16921 N.W. 57 AVENUE  
MIAMI, FL 33055 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PVST ( ) Delete  
Name: MONTENEGRO-TOIRAC, MARLENE  
Address: P O BOX 248816  
City-St-Zip: CORAL GABLES, FL 33124

Title: D ( ) Delete  
Name: DUBOIS, LIBI  
Address: P O BOX 248816  
City-St-Zip: CORAL GABLES, FL 33124

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PT (X) Change ( ) Addition  
Name: MONTENEGRO-TOIRAC, MARLENE  
Address: P O BOX 248816  
City-St-Zip: CORAL GABLES, FL 33124

Title: VS (X) Change ( ) Addition  
Name: MONTENEGRO, GLORIA  
Address: P O BOX 248816  
City-St-Zip: CORAL GABLES, FL 33124

Title: D ( ) Change (X) Addition  
Name: DUBOIS, LIBI  
Address: P O BOX 248816  
City-St-Zip: CORAL GABLES, FL 33124

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: LIBI DUBOIS

D

08/18/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date