2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 17, 2008 08:00 A Secretary of State DOCUMENT # P01000009858 1. Entity Name MORTGAGE MART USA, INC. Principal Place of Business Mailing Address POST OFFICE BOX 07186 POST OFFICE BOX 07186 FORT MYERS, FL 33919 FORT MYERS, FL 33919 01092008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1074658 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LUTKOFF, ANDREW DO NOT WRITE 9400 GLADIOLUS DR #100 FT MYERS, FL 33908 IN THIS SPACE 8. The above named entity submits this statement for the purpose of pranging 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE LUTKOFF, ANDREW NAME PO BOX 07186 STREET ADDRESS U00000787138 CITY-ST-ZIP FORT MYERS, FL 33919 01/17/08-80071-010 150.00 TITLE LEFKOWITZ, JUDITH NAME STREET ADDRESS POST OFFICE BOX 07186 CITY-ST-ZIP FORT MYERS, FL 33919 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-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 exemptions contained 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 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

TITLE NAME STREET ADDRESS CITY-SI-ZİP