2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000061076

Entity Name: MORTGAGESPOT.COM INC

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6555 NORTH POWERLINE ROAD 401 FAIRWAY DRIVE

DEERFIELD BEACH, FL 33441 US SUITE 114 FORT LAUDERDALE, FL 33309

New Mailing Address: Current Mailing Address:

6555 NORTH POWERLINE ROAD 401 FAIRWAY DRIVE

SUITE 114 DEERFIELD BEACH, FL 33441 US

FORT LAUDERDALE, FL 33309

FEI Number: 65-1114825 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:

BYER, PAUL A BYER, PAUL A 6555 NORTH POWERLINE ROAD

401 FÁIRWAY DRIVE SUITE 114 DEERFIELD BEACH, FL 33441 US

FORT LAUDERDALE, FL 333092408 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: 04/26/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PCD () Delete Title: (X) Change () Addition GARDNER, JAMES P GARDNER, JAMES P Name: Name: Address: Address:

11662 NW 20TH DRIVE 9714 N. W. 52ND MANOR City-St-Zip: CORAL SPRINGS, FL 33071 City-St-Zip: CORAL SPRINGS, FL 33076 US

VSD Title: VSD Title: () Delete (X) Change () Addition

Name: WILEY, EARL S Name: WILEY, EARL S 6636 LONGBOAT LANE G-108 2099 S. W. 8TH AVENUE Address: Address: BOCA RATON, FL 33433 BOCA RATON, FL 33486 US City-St-Zip: City-St-Zip:

Title: VPD Title: (X) Change () Addition () Delete VPD

BYER, PAUL A BYER, PAUL A Name: Name:

2915 PALM AIRE DR NO 2915 PALM AIRE DR NO Address: Address: City-St-Zip: POMPANO BEACH, FL 33069 City-St-Zip: POMPANO BEACH, FL 33069 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

VΡ SIGNATURE: PAUL A. BYER 04/26/2007