2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000072076

Entity Name: YOUR HOME/SU CASA MORTGAGE INC.

FILED Jan 15, 2006 Secretary of State

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

7217 EAST COLONIAL DR #111 7217 EAST COLONIAL DR #112

ORLANDO, FL 32807 ORLANDO, FL 32807

Current Mailing Address: New Mailing Address:

PO BOX 678507 ORLANDO, FL 32867

FEI Number: 59-3732379 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:

DOLLAR LEASING AND MANAGEMENT, LLC 7217 E COLONIAL DR, SUITE 111

7217 E COLONIAL DR, SUTE 112 ORLANDO, FL 32867 ORLANDO, FL 32807

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.

MARTE, HERIBERTO J

SIGNATURE: HERIBERTO MARTE 01/15/2006

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

MARTE, HERIBERTO J Name: Name: MARTE, HERIBERTO J 7217 E COLONIAL DR, SUITE 111 7217 E COLONIAL DR, SUITE 112 Address: Address:

City-St-Zip: ORLANDO, FL 32867 City-St-Zip: ORLANDO, FL 32867

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

Name: BILINGUAL EMPOWERMEN, TUNIVERSITY, LLC Name: MARTE, HERIBERTO J

7217 E COLONIAL DR, SUITE 111 7217 E COLONIAL DR, SUITE 112 Address: Address:

ORLANDO, FL 32807 ORLANDO, FL 32807 City-St-Zip: City-St-Zip:

Title: Title: (X) Change () Addition () Delete Name: MARTE, JACQUIE D Name:

DOLLAR LEASING AND M, ANAGEMENT, LLC 7217 E.COLONIAL DR, SUITE 111 Address: 7217 E.COLONIAL DR, SUITE 112 Address:

City-St-Zip: ORLANDO, FL 32867 City-St-Zip: ORLANDO, FL 32867

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.

SIGNATURE: HERIBERTO MARTE PD 01/15/2006