

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000072076

FILED
Jan 15, 2007
Secretary of State

Entity Name: YOUR HOME/SU CASA MORTGAGE INC.

Current Principal Place of Business:

7217 EAST COLONIAL DR #112
ORLANDO, FL 32807

New Principal Place of Business:

Current Mailing Address:

PO BOX 678507
ORLANDO, FL 32867

New Mailing Address:

FEI Number: 59-3732379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARTE, HERIBERTO J
7217 E COLONIAL DR, SUITE 112
ORLANDO, FL 32807 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MARTE, HERIBERTO J
Address: 7217 E COLONIAL DR, SUITE 112
City-St-Zip: ORLANDO, FL 32867

Title: VD () Delete
Name: MARTE, HERIBERTO J
Address: 7217 E COLONIAL DR, SUITE 112
City-St-Zip: ORLANDO, FL 32807

Title: ST () Delete
Name: MARTE, JACQUIE D
Address: 7217 E COLONIAL DR, SUITE 112
City-St-Zip: ORLANDO, FL 32867

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MARTE, HERIBERTO J
Address: P O BOX 678507
City-St-Zip: ORLANDO, FL 32867

Title: VD (X) Change () Addition
Name: MARTE, HERIBERTO J
Address: P O BOX 678507
City-St-Zip: ORLANDO, FL 32867

Title: ST (X) Change () Addition
Name: MARTE, JACQUIE D
Address: P O BOX 678507
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 J MARTE

PD

01/15/2007

Electronic Signature of Signing Officer or Director

Date