

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000093939

FILED
Jan 13, 2004
Secretary of State

Entity Name: FLAT FEE HOME LOANS, INC.

Current Principal Place of Business:

100 FIRST AVE S
SUITE 465
SAINT PETERSBURG, FL 33701

Current Mailing Address:

100 FIRST AVE S
SUITE 465
SAINT PETERSBURG, FL 33701

New Principal Place of Business:

100 FIRST AVE S
SUITE 345
SAINT PETERSBURG, FL 33701

New Mailing Address:

100 FIRST AVE S
SUITE 345
SAINT PETERSBURG, FL 33701

FEI Number: 65-1145871

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EICHOLTZ, MARK
100 FIRST AVE S
SUITE 465
SAINT PETERSBURG, FL 33701

Name and Address of New Registered Agent:

EICHOLTZ, MARK
100 FIRST AVE S
SUITE 345
SAINT PETERSBURG, FL 33701

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:

01/13/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: EICHOLTZ, MARK
Address: 100 FIRST AVE S #465
City-St-Zip: SAINT PETERSBURG, FL 33701

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: EICHOLTZ, MARK
Address: 100 FIRST AVE S #345
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: VP () Change (X) Addition
Name: HECTOR, KEVIN D
Address: 100 FIRST AVE S #345
City-St-Zip: SAINT PETERSBURG, FL 33701

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: KEVIN HECTOR

VP

01/13/2004

Electronic Signature of Signing Officer or Director

Date