

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000043878

FILED
Apr 28, 2004
Secretary of State

Entity Name: MORTGAGE LOAN SOLUTIONS CORP.

Current Principal Place of Business:

3900 NW 79 AVENUE
SUITE 509
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

3900 NW 79 AVENUE
SUITE 509
MIAMI, FL 33166

New Mailing Address:

FEI Number: 02-0595470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANCHEZ, CARLOS ALBERTO
3900 NW 79 AVE.
SUITE 509
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

SANCHEZ, CARLOS A
3900 NW 79 AVE.
SUITE 509
MIAMI, FL 33166 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: CARLOS A. SANCHEZ

04/28/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANCHEZ, CARLOS ALBERTO
Address: 3900 NW 79 AVENUE SUITE 509
City-St-Zip: MIAMI, FL 33166

Title: STD () Delete
Name: SANCHEZ, JUAN CARLOS
Address: 3900 NW 79 AVENUE, SUITE 509
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SANCHEZ, CARLOS A
Address: 3900 NW 79 AVENUE SUITE 509
City-St-Zip: MIAMI, FL 33166

Title: STD (X) Change () Addition
Name: SANCHEZ, JUAN C
Address: 3900 NW 79 AVENUE, SUITE 509
City-St-Zip: MIAMI, FL 33166

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: CARLOS A. SANCHEZ

PD

04/28/2004

Electronic Signature of Signing Officer or Director

Date