## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000097824

City-St-Zip:

MIAMI, FL 33131

Entity Name: DAVOS MORTGAGE BANKERS, INC

FILED Apr 30, 2008 Secretary of State

Littly Nan	ile. DAVOS II	IOR TOAGE BAINERS, INC.				
Current Pr	rincipal Place	of Business:	New Princip	New Principal Place of Business:		
1001 BRIC MIAMI, FL	KELL BAY DR 33131	, STE #3104	3104	1001 BRICKELL BAY DR, 3104 MIAMI, FL 33131		
Current Ma	ailing Addres	s:	New Mailing	New Mailing Address:		
1001 BRIC MIAMI, FL	KELL BAY DR 33131	, STE #3104	3104	1001 BRICKELL BAY DR, 3104 MIAMI, FL 33131		
FEI Number: 03-0481210 FEI Number Applied For ( ) FEI Number		FEI Number Not Applica	able ( ) Certificate of Status Desired (	)		
Name and	Address of C	urrent Registered Agent:	Name and A	Name and Address of New Registered Agent:		
	IANCIAL CON KELL BAY DR 33131 US		1001 BRICKE 3104	DAVOS FINANCIAL ADVISORS LLC 1001 BRICKELL BAY DR 3104 MIAMI, FL 33131 US		
The above in the State		submits this statement for the p	urpose of changing its	registered office or registered agent, or	both,	
SIGNATUR	RE: NAEMAR	BELTRAN		04/30/2008		
	Electron	ic Signature of Registered Age	nt	Date		
Election Can	npaign Financing	g Trust Fund Contribution ( ).				
OFFICERS	AND DIREC	TORS:	ADDITIONS/	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	MARTIN, RAFA	L BAY DR, STE #3104	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D ( ) Delete OSIO, DAVID 1001 BRICKELL BAY DR, STE #3104 MIAMI, FL 33131		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address:	SOTILLO, AND	Delete RES L BAY DR. STE #3104	Title: Name: Address:	( ) Change ( ) Addition		

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

City-St-Zip:

SIGNATURE: RAFAEL MARTIN P 04/30/2008