2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000107792

Entity Name: LOS PINOS MORTGAGES CORPORATION

FILED Jan 06, 2005 Secretary of State

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

5600 SW 135TH AVE., STE. 208 5600 SW 135TH AVE., STE. 208

MIAMI, FL 33175 MIAMI, FL 33183

Current Mailing Address: New Mailing Address:

5600 SW 135TH AVE., STE. 208 5600 SW 135TH AVE., STE. 208

MIAMI, FL 33175 MIAMI, FL 33183

FEI Number: 13-4214703 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:

 CELESTRIN, ADRIANA M
 CELESTRIN, ADRIANA M

 5600 SW 135TH AVE., STE. 208
 5600 SW 135TH AVE., STE. 208

 MIAMI, FL 33175 US
 MIAMI, FL 33183 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.

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

 Title:
 D
 () Delete

 Name:
 CELESTRIN, ANDRIANA M

 Address:
 5600 SW 135TH AVE., STE. 208

SIGNATURE: ADRIANA CELESTRIN

City-St-Zip: MIAMI, FL 33175

Title: D () Delete
Name: CELESTRIN, LAZARO

Address: 5600 SW 135TH AVE., STE. 208

City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

01/06/2005

Title: D (X) Change () Addition
Name: CELESTRIN, ADRIANA M

Address: 5600 SW 135TH AVE., STE. 208

City-St-Zip: MIAMI, FL 33183

Title: D (X) Change () Addition

Name: CELESTRIN, LAZARO

Address: 5600 SW 135TH AVE., STE. 208

City-St-Zip: MIAMI, FL 33183

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: ADRIANA CELESTRIN D 01/06/2005