


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State

05-03-2006 90239 028 ***150.00

DOCUMENT # P02000109399 1. Entity Name MORTGAGE HOLDING GROUP, INC.					
Principal Place of Business 8818 WEST FLAGLER STREET SUITE # 10 MIAMI, FL 33174			Mailing Address 8818 WEST FLAGLER STREET SUITE # 10 MIAMI, FL 33174		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number 04-3716939				Chg-P CR2E034 (11/05) <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent OLECH, DANIEL 8818 WEST FLAGLER STREET SUITE # 10 MIAMI, FL 33174	
7. Name and Address of New Registered Agent Name OLECH, DANIEL Street Address (P.O. Box Number is Not Acceptable) 8818 WEST FLAGLER STREET SUITE 112 City MIAMI FL Zip Code 33174				8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Daniel Olech</i> DANIEL OLECH DATE 4/30/06 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P/S OLECH, DANIEL 8818 WEST FLAGLER STREET SUITE 10 MIAMI, FL 33174	<input type="checkbox"/> Delete			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Daniel Olech</i> DANIEL OLECH DATE 4/30/06 Daytime Phone # (305) 773-7385 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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