


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90337 041 ***150.00

DOCUMENT # P03000005937	
1. Entity Name RUGA BAY MORTGAGE, CORP.	

Principal Place of Business 9500 N.W. 77TH AVE STE. 19 HIALEAH GARDENS, FL 33016	Mailing Address 9500 N.W. 77TH AVE STE. 19 HIALEAH GARDENS, FL 33016
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DO NOT WRITE IN THIS SPACE

04212005 No Chg-P CR2E034 (10/03)

4. FEI Number 54-2091363	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent GARCIA, GREGORIO M 8971 N.W. 5 ST. PEMBROKE PINES, FL 33024
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IN THIS SPACE**

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>Gregorio M. Garcia</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE <i>4/22/05</i>

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GARCIA, GREGORIO M 9500 N.W. 77TH AVE HIALEAH GARDENS, FL 33016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RUE, ANAIDIS 1411 N.W. 85TH WAY PEMBROKE PINE, FL 33024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD RUE, ROBERT JR. 1411 N.W. 85TH WAY PEMBROKE PINE, FL 33024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GARCIA, NOELIA 8971 N.W. 5TH ST PEMBROKE PINE, FL 33024
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify 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 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>Gregorio M. Garcia</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE <i>4/22/05</i> (30) 512-11559 <small>Date Daytime Phone #</small>