

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000008235

FILED  
Feb 21, 2005  
Secretary of State

Entity Name: ALLIED MORTGAGE PROFESSIONALS, INC.

## Current Principal Place of Business:

1515 S. FEDERAL HWY  
121  
BOCA RATON, FL 33432

## New Principal Place of Business:

## Current Mailing Address:

1515 S. FEDERAL HWY  
121  
BOCA RATON, FL 33432

## New Mailing Address:

FEI Number: 33-1039995      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MANN & WOLFF, LLP  
33 S.E. 4TH STREET, SUITE 102  
BOCA RATON, FL 33432 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: MALIK, BEN  
Address: 1451 W ROYAL PALM ROAD  
City-St-Zip: BOCA RATON, FL 33486

Title: VP ( ) Delete  
Name: HOWERY, MICHELLE  
Address: 100 SW 6TH AVE  
City-St-Zip: BOCA RATON, FL 33486

Title: VP ( ) Delete  
Name: SILVA, PAUL  
Address: 1267 SW 44 TERRACE  
City-St-Zip: DEERFIELD BEACH, FL 33442

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: SILVA, PAUL  
Address: 4070 NW 61ST WAY  
City-St-Zip: CORAL SPRINGS, FL 33067

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: BEN MALIK

PRES

02/21/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date