2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 19, 2004 8:00 am Secretary of State

DOCUMENT # P03000011752 1. Entity Name GN MORTGAGE GROUP, INC.					07-19-2004 90006 045 ***550.00				
Principal Place of Business % RON D' OYLEY 6102 MIRAMAR PARKWAY MIRAMAR, F; 33023		Mailing Address % RON D' OYLEY 6102 MIRAMAR PARKWAY MIRAMAR, F; 33023							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07032004	Chg-P	CR2E0:	34 (10/03)	
City & State		City & State			4. FEI Numbe	567679	70	-	plied For at Applicable
Zíp	Country	Zip	Country	·	5. Certificate	of Status Desired		\$8.75 Add Fee Require	
	6. Name and Address of Current	Registered Agent			7. Name and	Address of New R	egistered A	gent	-
JONES, KNOVACK G 18590 NW 67TH AVENUE				Name Street Address (P.O. Box Number is Not Acceptable)					
SUITE 201 MIAMI, FL									
The above named entity submits this statement for the purpose of changing its re-				City FL Zip Code					
the obligat	Sonature, typed or printed name of registered agent LE NOW!!! FEE IS \$550.00		E: Registered Ap	gent signature requir		, in the diate of the	DATE	arungi witti,	and accept
10.	ue by September 8, 2004					OLIANIOEO TO OFF	.0500		•
TITLE	OFFICERS AND	Directions Delete	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND		************
NAME STREET ADDRESS CITY-ST-ZIP	D'OYLEY, RON NO ST		TITLE NAME STREET A	ADDRESS	•			☐ Change	☐ Addition
}			••••	1-71h	•				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAVIS, ARLONIA J 6102 MIRAMAR PARKWAY		TITLE NAME STREET A CITY-ST	ADDRESS I-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D D'OYLEY, RON 6102 MIRAMAR PARKWAY MIRAMAR, FL 33023	☐ Delete	TITLE NAME STREET A CITY-ST	ADDRESS -		-		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A CITY-ST	ADDRESS (-ZIP		. 110		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET A	ADDRESS 1-Zip				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	artiful that the information curpolled with	☐ Detete	CITY+ST		20010-110-07/20			Change	Addition

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 drift like appoyered.

SIGNATURE:

HE AND TYPED OR PRINTED WANTED BEAUTY OFFICER OR DIRECTOR

JULY 12

954-964-0050