2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000019916

Entity Name: HOME MORTGAGE EXPERTS, INC.

FILED Apr 17, 2012 Secretary of State

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|--|------------------------------------|-----------------------------------|---|--|
| 651 OKEECHOBEE BLVD | | | | |
| 1110 PALM BEACH, FL 33401 | | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 651 OKEECHOBEE BLVD | | | | |
| 1110 PALM BEACH, FL 33401 | | | | |
| FEI Number: 81-0593130 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | Name and Address of | Name and Address of New Registered Agent: | |
| SCHAFRANICK, PAUL R 651 OKEECHOBEE BLVD 1110 PALM BEACH, FL 33401 | | | | |
| , | | urness of shanging its registered | office or registered agent, or both | |
| in the State of Florida. | ibililis tilis statement for the p | urpose of changing its registered | office or registered agent, or both | |
| SIGNATURE: | | | | |
| Electronic | Signature of Registered Age | ent | Date | |

OFFICERS AND DIRECTORS:

Title: PVTD

Name: SCHAFRANICK, PAUL
Address: 651 OKEECHOBEE BLVD.
City-St-Zip: PALM BEACH, FL 33401

I hereby 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 all other like empowered.

SIGNATURE: PAUL SCHAFRANICK PVTD 04/17/2012