

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000027775

FILED
Feb 11, 2004
Secretary of State

Entity Name: CAPITOL ONE HOME INVESTMENT CORPORATION

Current Principal Place of Business:

2960 BLUE JAY DR
COOPER CITY, FL 33026

New Principal Place of Business:

5722 S. FLAMINGO ROAD
SUITE 235
COOPER CITY, FL 33330

Current Mailing Address:

2960 BLUE JAY DR
COOPER CITY, FL 33026

New Mailing Address:

5722 S. FLAMINGO ROAD
SUITE 235
COOPER CITY, FL 33330

FEI Number: 16-1668619

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SPARKS, LAVERNE
2960 BLUE JAY DR
COOPER CITY, FL 33026

Name and Address of New Registered Agent:

SPARKS, LAVERNE D CEO
5722 S. FLAMINGO ROAD
SUITE 235
COOPER CITY, FL 33330

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: LAVERNE SPARKS

02/11/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SPARKS, LAVERNE
Address: 2960 BLUE JAY DR
City-St-Zip: COOPER CITY, FL 33026

Title: V () Delete
Name: SPARKS, JAMES A
Address: 2960 BLUE JAY DR
City-St-Zip: COOPER CITY, FL 33026

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SPARKS, LAVERNE
Address: 5722 S. FLAMINGO ROAD SUITE 235
City-St-Zip: COOPER CITY, FL 33330

Title: CEO (X) Change () Addition
Name: MOSS, CEPEDA N
Address: 5722 S. FLAMINGO ROAD
City-St-Zip: COOPER CITY, FL 33330

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: LAVERNE SPARKS

P

02/11/2004

Electronic Signature of Signing Officer or Director

Date