2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000067934

Entity Name: COMMERCIAL HOME LENDING, CORP.

FILED Aug 31, 2004 Secretary of State

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Principal Place of Business: New Principal Place of Business:

6804 SW 114 PLACE 10481 N. KENDALL DRIVE

D-203-E

MIAMI, FL 33173 MIAMI, FL 33173

Current Mailing Address: New Mailing Address:

6804 SW 114 PLACE 12780 SW 105 AVENUE

H MIAMI, FL 33176 MIAMI, FL 33173

FEI Number: 20-0062954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COPIN, ADA G
6804 S.W. 114 PLACE
H
COPIN, ADA G
12780 SW 104 AVENUE
MIAMI, FL 33176

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: ADA G. COPIN 08/31/2004

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

MIAMI, FL 33173

Title: P () Delete Title: P/S (X) Change () Addition

Name: COPIN, ADA G Name: COPIN, ADA G

 Address:
 6804 SW 114 PLACE, UNIT H
 Address:
 12780 SW 105 AVENUE

 City-St-Zip:
 MIAMI, FL 33173
 City-St-Zip:
 MIAMI, FL 33176

Title: S (X) Delete Title: () Change () Addition

 Name:
 FERNANDEZ, CARLOS G SR.
 Name:

 Address:
 120 N.W. 87 AVENUE, F104
 Address:

 City-St-Zip:
 MIAMI, FL 33172
 City-St-Zip:

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: ADA G. COPIN P/S 08/31/2004