

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P03000098716

FILED
Jul 11, 2006
Secretary of State

Entity Name: SEG MORTGAGE SOLUTIONS INC.

Current Principal Place of Business:

8200 NW 27TH ST SUITE 112
DORAL, FL 33122

New Principal Place of Business:

Current Mailing Address:

8200 NW 27TH ST SUITE 112
DORAL, FL 33122

New Mailing Address:

FEI Number: 20-0208210

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GIL, SIMON E
8200 NW 27TH ST
112
MIAMI, FL 33122 US

Name and Address of New Registered Agent:

GIL, SIMON E
8200 NW 27TH ST
112
DORAL, FL 33122 US

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: SIMON E GIL

07/11/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: GIL, SIMON E
Address: 9145 SW 118 ST
City-St-Zip: MIAMI, FL 33176

Title: CEO () Delete
Name: GIL, SIMON E
Address: 9145 SW 118 ST
City-St-Zip: MIAMI, FL 33176

Title: DVST () Delete
Name: GIL, MARGARITA
Address: 9145 SW 118 ST
City-St-Zip: MIAMI, FL 33176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPV (X) Change () Addition
Name: GIL, SIMON E
Address: 8200 NW 27TH ST SUITE 112
City-St-Zip: DORAL, FL 33122

Title: CEO (X) Change () Addition
Name: GIL, SIMON E
Address: 8200 NW 27TH ST SUITE 112
City-St-Zip: DORAL, FL 33122

Title: ST (X) Change () Addition
Name: GIL, SIMON E
Address: 8200 NW 27TH ST SUITE 112
City-St-Zip: DORAL, FL 33122

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: SIMON E. GIL

P

07/11/2006

Electronic Signature of Signing Officer or Director

Date