2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000098716

Entity Name: SEG MORTGAGE SOLUTIONS INC.

Apr 27, 2007 Secretary of State

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

8200 NW 27TH ST SUITE 112 DORAL, FL 33122

Current Mailing Address: New Mailing Address:

8200 NW 27TH ST SUITE 112 DORAL, FL 33122

FEI Number: 20-0208210 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

LLAURADO, RAMON GIL, SIMON E

10540 NW 26TH ST 8200 NW 27TH STREET 103 DORAL, FL 33122 US 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

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

04/27/2007

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

ARMAS, KRIS GIL, SIMON E Name: Name:

9030 SW 125TH AVENUE, APT E-108 8200 NW 27TH STREET SUITE 112 Address: Address:

DORAL, FL 33122 City-St-Zip: MIAMI, FL 33186 City-St-Zip:

CEO Title: Title: () Delete CEO (X) Change () Addition GIL, SIMON E Name: ARMAS, KRIS Name:

9030 SW 125TH AVE. APT. E 108 8200 NW 27TH ST SUITE112 Address: Address:

MIAMI, FL 33186 City-St-Zip: City-St-Zip: DORAL, FL 33122

Title: (X) Change () Addition Title: () Delete VST ARMAS, KRIS Name: GIL, MARGARITA Name:

9030 SW 125TH AVE. APT E 108 8200 NW 27TH ST SUITE 112 Address: Address:

City-St-Zip: MIAMI, FL 33186 City-St-Zip: DORAL, FL 33122

I hereby certify that the information supplied with this filing does not qualify 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.

Ρ SIGNATURE: SIMON E GIL 04/27/2007