2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000102845

1. *Entity Name*

SOUTH FLORIDA MORTGAGE FINANCIAL SOLUTIONS INC

Principal Place of Business	Mailing Address
10030 WEST MCNAB RD TAMARAC, FL 33321 US	10030 WEST MCNAB RD TAMARAC, FL 33321 US

DO NOT WRITE IN THIS SPACE

FILED
Jan 14, 2005 08:00 AM
Secretary of State

01062005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
20-0232637	Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MORGAN, MARK
12043 NW 1 STREET
CORAL SPRINGS, FL 33071

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8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable   (NOTE Registered Agent signature required when reinstating)   DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	MORGAN, MARK
STREET ADDRESS	12043 NW 1 STREET
CITY-ST-ZIP	CORAL SPRINGS, FL 33071

TITLE	
NAME	
STREET ADDRESS	
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CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: