

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103910

FILED  
Jul 14, 2004  
Secretary of State

Entity Name: ONE-STOP MORTGAGE SHOPPE, INC.

## Current Principal Place of Business:

4300 N.W. 115TH TERRACE  
SUNRISE, FL 33323

## New Principal Place of Business:

3999 NW 122ND TERRACE  
SUNRISE, FL 33323

## Current Mailing Address:

4300 N.W. 115TH TERRACE  
SUNRISE, FL 33323

## New Mailing Address:

3999 NW 122ND TERRACE  
SUNRISE, FL 33323

FEI Number: 90-0117468

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAMMER, EDWIN L  
7491 W. OAKLAND PARK BOULEVARD  
SUITE 301  
LAUDERHILL, FL 33319

## Name and Address of New Registered Agent:

SHAW, PAULETTE M  
3999 NW 122ND TERRACE  
SUNRISE, FL 33323

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: PAULETTE M. SHAW

07/14/2004

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:

Title: D ( ) Delete  
Name: SHAW, PAULETTE  
Address: 4300 N.W. 115TH TERRACE  
City-St-Zip: SUNRISE, FL 33323

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: P ( ) Change (X) Addition  
Name: SHAW, PAULETTE M PRES  
Address: 3999 NW 122ND TERRACE  
City-St-Zip: SUNRISE, FL 33323

Title: S ( ) Change (X) Addition  
Name: SHAW, PAULETTE M  
Address: 3999 NW 122ND TERRACE  
City-St-Zip: SUNRISE, FL 33323

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: PAULETTE M. SHAW

D

07/14/2004

Electronic Signature of Signing Officer or Director

Date