

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90395 047 ***158.75

DOCUMENT # P03000153524																											
1. Entity Name PRODIGAL MORTGAGE GROUP, INC.																											
Principal Place of Business 782 NW 42ND AVENUE, SUITE 442 MIAMI, FL 33126		Mailing Address 782 NW 42ND AVENUE, SUITE 442 MIAMI, FL 33126																									
2. Principal Place of Business 782 N.W. 42 AVENUE Suite, Apt. #, etc. SUITE 433 City & State MIAMI, FL Zip 33126 Country USA		3. Mailing Address 782 N.W. 42 AVENUE Suite, Apt. #, etc. SUITE 433 City & State MIAMI, FL Zip 33126 Country USA																									
6. Name and Address of Current Registered Agent ARECES, RAMIRO A 782 NW 42ND AVENUE, SUITE 442 MIAMI, FL 33126		7. Name and Address of New Registered Agent Name SAME Street Address (P.O. Box Number is Not Acceptable) 782 N.W. 42 AVENUE, SUITE 433 City MIAMI, FL Zip Code 33126																									
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 <u>RAMIRO A. ARECES</u> (NOTE: Registered Agent signature required when re-registering) DATE <u>04.11.2006</u>																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																									
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																									
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>[Signature]</u>		Date <u>04.11.2006</u> Daytime Phone # <u>305-460-0080</u>																									