

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000153591

FILED  
Sep 07, 2005  
Secretary of State

Entity Name: INFLOT MORTGAGE SERVICES, INC.

## Current Principal Place of Business:

110 EAST BROWARD BLVD.  
SUITE 1950  
FT. LAUDERDALE, FL 33301

## New Principal Place of Business:

2210 N. OCEAN BLVD.  
SUITE 8B  
FT. LAUDERDALE, FL 33305

## Current Mailing Address:

110 EAST BROWARD BLVD.  
SUITE 1950  
FT. LAUDERDALE, FL 33301

## New Mailing Address:

2 S. BISCAYNE BLVD.  
SUITE 3400  
MIAMI, FL 33131

FEI Number: 41-2120116

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SANTIAGO, KATHIA I  
110 EAST BROWARD BLVD.  
SUITE 1950  
FT. LAUDERDALE, FL 33301 US

## Name and Address of New Registered Agent:

VALDES-FAULI CORPORATE SERVICES, INC.  
2 S. BISCAYNE BLVD.  
SUITE 3400  
MIAMI, FL 33131 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: VALDES-FAULI CORPORATE SERVICES, INC.

09/07/2005

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: DP ( ) Delete  
Name: SANTIAGO, KATHIA I  
Address: 110 EAST BROWARD BLVD. SUITE 1950  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: DS ( ) Delete  
Name: SANTIAGO, KATHIA I  
Address: 110 EAST BROWARD BLVD. SUITE 1950  
City-St-Zip: FT. LAUDERDALE, FL 33301

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: KATHIA I. SANTIAGO

P

09/07/2005

Electronic Signature of Signing Officer or Director

Date