2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000036199

Entity Name: MUTUAL COMMUNITY PROPERTY INVESTMENTS, INC.

FILED Apr 22, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1100 NW 15TH PLACE FORT LAUDERDALE, FL 33311				1510 NW 11TH AVENUE FORT LAUDERDALE, FL 33311			
Current Mailing Address:				New Mailing Address:			
1100 NW 15TH PLACE FORT LAUDERDALE, FL 33311				1510 NW 11TH AVENUE FORT LAUDERDALE, FL 33311			
FEI Number:	83-0386206	FEI Number Applied For ()	FEI Nun	nber Not Appli	cable ()	Certificate of Stat	tus Desired (X)
Name and Address of Current Registered Agent: Name and					Address of	New Registered	Agent:
DEROSIER, MARCEL 1100 NW 15TH PLACE FORT LAUDERDALE, FL 33311 US				FRANCOIS, AULIGENE 1510 NW 11TH AVENUE FORT LAUDERDALE, FL 33311 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: AULIGENE FRANCOIS				04/22/2005			
	Electronic	Signature of Registered Agent	t			Date	
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () DEROSIER, MAR 1206 15TH STRE FORT LAUDERD	ET		Title: Name: Address: City-St-Zip:	FRANCOIS, A 1510 N W 11T		on
Title: Name: Address: City-St-Zip:	VP () C CHARLES, ERNE 1623 3RD AVENU FORT LAUDERD	JE N.E.		Title: Name: Address: City-St-Zip:	DEROSIER, M 1206 N W 15T		on
Title: Name: Address: City-St-Zip:	VP () E PIERRE, MATHAI 1100 NW 15TH F FORT LAUDERD	LACE		Title: Name: Address: City-St-Zip:	() Change ()Additio	n
Title: Name: Address: City-St-Zip:	VP () E -MAUDE-FILES, I 6410 SW 7TH ST MARGATE, FL 3	REET		Title: Name: Address: City-St-Zip:	T (X MAUDE-FILES 6410 SW 7TH MARGATE, FL	STREET	on
Title: Name: Address: City-St-Zip:	()[Delete		Title: Name: Address: City-St-Zip:	FLORVILUS, 3		on
Title: Name: Address: City-St-Zip:	()[Delete		Title: Name: Address: City-St-Zip:	ODIRUS, CHA 4360 NW 35TI		on

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: AULIGENE FRANCOIS P 04/22/2005