

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000057129

Entity Name: THE CLOSING EXPERT INC

FILED
Jan 11, 2005
Secretary of State

Current Principal Place of Business:

561 SOUTH FIG TREE LANE
PLANTATION, FL 333173942

New Principal Place of Business:

6600 TAFT STREET
SUITE 206
HOLLYWOOD, FL 33024

Current Mailing Address:

561 SOUTH FIG TREE LANE
PLANTATION, FL 333173942

New Mailing Address:

6600 TAFT STREET
SUITE 206
HOLLYWOOD, FL 33024

FEI Number: 20-1022528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEREZ, COSME
561 SOUTH FIG TREE LANE
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

PEREZ, COSME
6600 TAFT STREET
HOLLYWOOD, FL 33024 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:

01/11/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PEREZ, COSME
Address: 561 SOUTH FIG TREE LANE
City-St-Zip: PLANTATION, FL 33317

Title: VP () Delete
Name: EINHORN, ALLISON K
Address: 561 SOUTH FIG TREE LANE
City-St-Zip: PLANTATION, FL 33317

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEREZ, COSME
Address: 6600 TAFT STREET, SUITE 206
City-St-Zip: HOLLYWOOD, FL 333024

Title: VP (X) Change () Addition
Name: EINHORN, ALLISON K
Address: 6600 TAFT STREET, SUITE 206
City-St-Zip: HOLLYWOOD, FL 33317

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: ALLISON EINHORN

VP

01/11/2005

Electronic Signature of Signing Officer or Director

Date