

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060286

FILED  
Jan 25, 2005  
Secretary of State

Entity Name: EXCELLENCE MORTGAGE CORPORATION

## Current Principal Place of Business:

6300 SW 138 CT  
# 208  
MIAMI, FL 33183

## New Principal Place of Business:

9100 S.DADELAND BLVD  
PH-1, SUITE-1701  
MIAMI, FL 33156

## Current Mailing Address:

6300 SW 138 CT  
# 208  
MIAMI, FL 33183

## New Mailing Address:

9100 S.DADELAND BLVD  
PH-1, SUITE-1701  
MIAMI, FL 33156

FEI Number: 20-0980130

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SIFREDO, AMAURY  
6300 SW 138 CT  
# 208  
MIAMI, FL 33183 US

## Name and Address of New Registered Agent:

SIFREDO, AMAURY  
5445 COLLINS AVE  
# 1607  
MIAMI, FL 33140 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: AMAURY SIFREDO

01/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SIFREDO, AMAURY  
Address: 6300 SW 138 CT  
City-St-Zip: MIAMI, FL 33183

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SIFREDO, AMAURY  
Address: 5445 COLLINS AVE # 1607  
City-St-Zip: MIAMI, FL 33140

Title: VP ( ) Change (X) Addition  
Name: SIFREDO, JOSE  
Address: 9328 SW 38 ST  
City-St-Zip: MIAMI, FL 33165

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: AMAURY SIFREDO

P

01/25/2005

Electronic Signature of Signing Officer or Director

Date