

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062103

Entity Name: CAPITOL MORTGAGE, INC.

FILED
Apr 20, 2005
Secretary of State

Current Principal Place of Business:

POST OFFICE BOX 351268
MIAMI,, FL 331357268 US

New Principal Place of Business:

9370 SUNSET DRIVE
SUITE 142
MIAMI,, FL 33173 US

Current Mailing Address:

POST OFFICE BOX 351268
MIAMI,, FL 331357268 US

New Mailing Address:

9370 SUNSET DRIVE
SUITE 142
MIAMI,, FL 33173 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ACOSTA, JOE
701 S.W. 27TH AVENUE
SUITE 608
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

SAAVEDRA, BEATRIZ
9370 SUNSET DRIVE
SUITE 142
MIAMI, FL 33173 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: BEATRIZ SAAVEDRA

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: ACOSTA, JOE
Address: POST OFFICE BOX 351268
City-St-Zip: MIAMI, FL 331357268 US

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ACOSTA, JOE
Address: 9370 SUNSET DRIVE SUITE 142
City-St-Zip: MIAMI, FL 33173 US

Title: VPST () Change (X) Addition
Name: SAAVEDRA, BEATRIZ
Address: 9370 SUNSET DRIVE, SUITE 142
City-St-Zip: MIAMI, FL 33173 US

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: BEATRIZ SAAVEDRA

VP

04/20/2005

Electronic Signature of Signing Officer or Director

Date