2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000119140

City-St-Zip:

MIAMI, FL 33181

Entity Name: KNOV MORTGAGE AND INVESTMENTS, INC.

FILED Mar 22, 2005 Secretary of State

Current Principal Place of Business:					New Principal Place of Business:			
1016 NE 163RD SRREET NORTH MIAMI BEACH, FL 33162					8400 NORTH UNIVERSITY DRIVE SUITE #106 TAMARAC, FL 33321			
Current Mailing Address:					New Mailing Address:			
1016 NE 163RD SRREET NORTH MIAMI BEACH, FL 33162					8400 NORTH UNIVERSTY DRIVE SUITE#106 TAMARAC, FL 33321			
FEI Number:	: 77-0644580	FEI Numb	er Applied For()	FEI Nun	nber Not Appli	cable ()	Certificate of Status Desired (X)	
Name and	Address of C	urrent Reg	gistered Agent:		Name and	Address of	New Registered Agent:	
VILSON, YVANE 1016 NE 163RD SRREET NORTH MIAMI BEACH, FL 33162 US					VILSON, YVANE 8400 NORTH UNIVERSITY DRIVE SUITE #106 TAMARAC, FL 33321 US			
	named entity se of Florida.	submits this	statement for the p	urpose o	f changing it	s registered	office or registered agent, or both,	
SIGNATURE: YVANE VILSON					03/22/2005			
	Electror	ic Signatur	e of Registered Age	ent			Date	
Election Car	mpaign Financin	g Trust Fund	Contribution ().					
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PCEO () VILSON, YVAN 11909 W. BISC MIAMI, FL 331	CANAL RD			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () VILSON, YVAN 11909 W. BISC MIAMI, FL 331	CANAL RD			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () VILSON, JEFF 11905 W. BISC MIAMI, FL 331				Title: Name: Address: City-St-Zip:	VILSON, YVAN	BISCAYNE CANAL ROAD	
Title: Name: Address:	VD (X) DELMONT, DEI 10036 SW 222				Title: Name: Address:	() Change ()Addition	

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.

City-St-Zip:

SIGNATURE: YVANE VILSON D 03/22/2005