

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000136523

FILED
Apr 29, 2005
Secretary of State

Entity Name: CASAFINA MORTGAGE & FINANCE, CORP.

Current Principal Place of Business:

2410 NW 89 AVE
SUNRISE, FL 33322

New Principal Place of Business:

Current Mailing Address:

2410 NW 89 AVE
SUNRISE, FL 33322

New Mailing Address:

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

Name and Address of Current Registered Agent:

DAWODU, OLUSESI A
2410 NW 89 AVE
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: DAWODU, OLUSESI A
Address: 2410 NW 89 AVE
City-St-Zip: SUNRISE, FL 33322

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: DAWODU, OLUSESI A
Address: 2410 NW 89 AVE
City-St-Zip: SUNRISE, FL 33322 US

Title: D () Change (X) Addition
Name: ADETORO, MURPHY ENGR.
Address: 992 CARRIAGE TRACE WAY
City-St-Zip: STONE MOUNTAIN, GA 30087 US

Title: D () Change (X) Addition
Name: ORUKOTAN, ANTHONY DR.
Address: 6641 SW 8TH STREET
City-St-Zip: PEMBROKE PINES, FL 33023 US

Title: D () Change (X) Addition
Name: OKONMAH, ANTHONY D
Address: 600 BRICKELL AVENUE, SUITE #704
City-St-Zip: MIAMI, FL 33131 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: OLUSESI A. DAWODU

DPST

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date