2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000148326

Entity Name: FAMILY AMERICA MORTGAGE GROUP INC.

FILED Jan 05, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2937 SW 27TH AVENUE, SUITE 104 2937 SW 27TH AVENUE COCONUT GROVE, FL 33133

SUITE 104

COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Current Mailing Address: New Mailing Address:

2937 SW 27TH AVENUE, SUITE 104 1312 OBISPO AVE

COCONUT GROVE, FL 33133 CORAL GABLES, FL 33134

FEI Number: 20-1932802 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ZAWADZKI, GARY ZAWADZKI, GARY 1312 OBISPO AVE. 2937 SW 29TH AVENUE, SUITE 104

COCONUT GROVE, FL 33133 CORAL GABLES, FL 33134 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: 01/05/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

() Delete Title: (X) Change () Addition

ZAWADZKI, GARY ZAWADZKI, GARY Name: Name: 2937 SW 27TH AVENUE, SUITE 104 Address: 1312 OBISPO AVE Address:

City-St-Zip: COCONUT GROVE, FL 33133 City-St-Zip: CORAL GABLES, FL 33134

Title: VΡ () Delete Title: VΡ (X) Change () Addition

Name: AONGMAN, DAN Name: LONGMAN, DAN

2937 SW 27TH AVENUE, SUITE 104 Address: 2937 SW 27TH AVENUE, SUITE 104 Address: COCONUT GROVE, FL 33133 COCONUT GROVE, FL 33133 City-St-Zip: City-St-Zip:

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 Statutés. 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: GARY ZAWADZKI PT 01/05/2005