2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155675

Entity Name: MORTGAGES FOR HOMES LENDING, INC

FILED Jul 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

20401 NORTHWEST 2ND AVE 99 NORTHWEST 2ND AVE

SUITE 239H 311 MIAMI, FL 33169 MIAMI, FL 33169

Current Mailing Address: New Mailing Address:

20401 NW 2ND AVE. P O BOX 170032 SUITE 311 MIAMI, FL 33017 MIAMI, FL 33169

FEI Number: 20-1890691 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:

MORGAN, KEVIN G MORGAN, KEVIN G 20401 NW 2ND AVE, SUITE 311 19560 NW 2ND AVE MIAMI, FL 33169 MIAMI, FL 33055

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: KMORGAN 07/14/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

MIAMI, FL 33169

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

MIAMI, FL 33017

City-St-Zip:

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

MORGAN, KEVIN G MORGAN, KEVIN G Name: Name: P O BOX 170032 20401 NW 2ND AVE, SUITE 311 Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33017

Title: Title: CFO () Delete (X) Change () Addition SAVOURY, M Name: Name: SAVOURY, M 20401 NW 2ND AVE, SUITE 311 Address: P O BOX 170032 Address:

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

MORGAN, S MORGAN, S Name: Name: 20401 NW 2ND AVE, SUITE 311 P O BOX 170032 Address: Address: City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33017

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

CHACON, MARTA CHACON, MARTA Name: Name: Address: 20401 NW 2ND AVE, SUITE 311 Address: P O BOX 170032 City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI, FL 33017

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Ρ SIGNATURE: KMORGAN 07/14/2008