2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2006
Secretary of State

DOCUMENT# P05000065378

Entity Name: HOMELOAN M CORPORATION, INC.

Current Principal Place of Business:

1254 S. JOHN YOUNG PARKWAY, STE A&E
KISSIMMEE, FL 34741

New Principal Place of Business:

1262 S. JOHN YOUNG PARKWAY
KISSIMMEE, FL 34741

Current Mailing Address:

1254 S. JOHN YOUNG PARKWAY, STE A&E
KISSIMMEE, FL 34741

New Mailing Address:

1262 S. JOHN YOUNG PARKWAY
KISSIMMEE, FL 34741

FEI Number: 41-2175174 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAINT-CYR, MAX
1254 S. JOHN YOUNG PARKWAY, STE A&E
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

SAINT-CYR, MAX
1262 S. JOHN YOUNG PARKWAY
KISSIMMEE, FL 34741 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: 04/25/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: SAINT-CYR, MAX
Address: 707 DEL RIO WAY
City-St-Zip: KISSIMMEE, FL 34758

Title: D ( ) Delete
Name: SAINT-CYR, EXUMENE
Address: 707 DEL RIO WAY
City-St-Zip: KISSIMMEE, FL 34758

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SAINT-CYR, MAX
Address: 407 MARLBERRY LEAF AVE
City-St-Zip: KISSIMMEE, FL 34758

Title: D (X) Change ( ) Addition
Name: SAINT-CYR, EXUMENE
Address: 407 MARLBERRY LEAF AVE
City-St-Zip: KISSIMMEE, FL 34758

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: MAX SAINT-CYR PRES 04/25/2006
Electronic Signature of Signing Officer or Director — Date