2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000112659

Entity Name: CENTURY HOME LOANS, INC.

FILED Jan 14, 2009 Secretary of State

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

8501 SW 124 AVENUE 9430 INDEPENDENCE ROAD

SUITE 101 MIAMI, FL 33157 MIAMI, FL 33183

Current Mailing Address: New Mailing Address:

1602 ALTON ROAD 9430 INDEPENDENCE ROAD

SUITE 596 MIAMI, FL 33157 MIAMI BEACH, FL 33139

FEI Number: 20-3338957 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:

ALFONSO, ANTONIO P

1602 ALTON ROAD

596

VARGAS, AURORA R P

9430 INDEPENDENCE ROAD

MIAMI, FL 33157 US

596 MIAMI, FL 33157 U MIAMI BEACH, FL 33139 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: AURORA VARGAS 01/14/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Name:ALFONSO, ANTONIO PName:VARGAS, AURORA RAddress:1602 ALTON ROAD #596Address:9430 INDEPENDENCE ROAD

City-St-Zip: MIAMI BEACH, FL 33139 City-St-Zip: MIAMI, FL 33157

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

 Name:
 NEREYDA, COMAS
 Name:

 Address:
 1602 ALTON ROAD #596
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

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

 Name:
 ROMERO, LUDMILLA
 Name:

 Address:
 1602 ALTON ROAD #596
 Address:

 City-St-Zip:
 MIAMI BEACH, FL 33139
 City-St-Zip:

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.

SIGNATURE: AURORA VARGAS P 01/14/2009