## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## May 02, 2007 8:00 am Secretary of State **DOCUMENT # P05000148930** 05-02-2007 90079 017 \*\*\*150.00 HISPANIA MORTGAGE CORP., INC. Principal Place of Business Mailing Address 1304 BURBANK COURT 1304 BURBANK COURT SUN CITY CENTER, FL 33573 SUN CITY CENTER, FL 33573 04042007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For **NOT APPLICABLE** Not Applicable \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent REYES, ANGEL DO NOT WRITE 1304 BURBANK COURT SUN CITY CENTER, FL 33573 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE wed agreent and title if applicable (NOTE: Registered Agent signature required when reinstein FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME REYES, ANGEL STREET ADDRESS 1304 BURBANK COURT CITY-ST-77P SUN CITY CENTER, FL 33573 TITLE NAME STREET ADDRESS CITY-ST-71P MILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZEP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZDP TITLE NAME

**FILED** 

12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE: