## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000020644

DORAL, FL 33166

City-St-Zip:

Entity Name: ALAMAR MORTGAGE BROKERS, INC

FILED Jan 18, 2008 Secretary of State

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|---|--------------------------------------|--------------------------------|---|--|--|
| Current Principal Place of Business:        |                                      |                                | New Principal Place                         | New Principal Place of Business:             |  |
| 330 SW 27 AVE, STE 404<br>MIAMI, FL 33135   |                                      |                                | 7570 NW 14 ST<br>114<br>MIAMI, FL 33126     | 114  |  |
| Current N                                   | lailing Addres                       | ss:                            | New Mailing Address                         | New Mailing Address:                         |  |
| 4803 NW<br>OPA LOCI                         | 195 ST.<br>KA, FL 33055              |                                |   |  |  |
| FEI Number                                  | : 20-4324481                         | FEI Number Applied For()       | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )            |  |
| Name and                                    | d Address of (                       | Current Registered Agent:      | Name and Address o                          | f New Registered Agent:                      |  |
| 4803 NW                                     | ROBERTO P<br>195 ST<br>KA, FL 33055  | US                             |   |  |  |
|   | e named entity<br>e of Florida.      | submits this statement for the | purpose of changing its registered          | d office or registered agent, or both,       |  |
| SIGNATUI                                    | RE:                                  |                                |   |  |  |
|   | Electron                             | nic Signature of Registered Ag | ent   | Date   |  |
| Election Ca                                 | mpaign Financin                      | g Trust Fund Contribution ( ). |   |  |  |
| OFFICERS AND DIRECTORS:                     |                                      |                                | ADDITIONS/CHANGE                            | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | LINARES, ROE<br>4803 NW 195          | ST                             | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                      |  |
| Title:<br>Name:<br>Address:                 | V (X<br>LINARES, JOS<br>8051 NW 36 S |                                | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                      |  |

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: ROBERTO LINARES P 01/18/2008