2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000079448

FILED Apr 24, 2007 Secretary of State

Entity Name: FINANCIAL TRUST HOME MORTGAGE CORP.

Current Principal Place of Business:		New Principal Place of Business:		
	ST SUITE 216 FL 33012			
Current Mailing Address:		New Mailing Address:		
	ST SUITE 216 FL 33012			
FEI Number	: 20-5034516	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of (Current Registered Agent:	Name and Address	of New Registered Agent:
728 SE PA		US		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
	e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,
in the Stat	e of Florida. RE:	submits this statement for the particles of Registered Age		ed office or registered agent, or both, Date
in the Stat SIGNATU	e of Florida. RE: Electror	,		
in the Stat SIGNATU Election Ca	e of Florida. RE: Electror	nic Signature of Registered Age g Trust Fund Contribution().	ent	
in the Stat SIGNATU Election Ca	e of Florida. RE: Electror mpaign Financin S AND DIREC	nic Signature of Registered Age g Trust Fund Contribution (). TORS:) Delete DSE A DR	ent	Date
in the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	e of Florida. RE: Electror mpaign Financin S AND DIREC P (DEL MAZO, JO 728 SE PARK HIALEAH, FL 3	nic Signature of Registered Age g Trust Fund Contribution (). TORS:) Delete DSE A DR 33010) Delete ITONIO	ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: LINA DEL MAZO T 04/24/2007