

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000079448

FILED
May 04, 2009
Secretary of State

Entity Name: FINANCIAL TRUST HOME MORTGAGE CORP.

Current Principal Place of Business:

419 W 49 ST SUITE 216
HIALEAH, FL 33012

New Principal Place of Business:

728 SE PARK DR
HIALEAH, FL 33010

Current Mailing Address:

419 W 49 ST SUITE 216
HIALEAH, FL 33012

New Mailing Address:

728 SE PARK DR
HIALEAH, FL 33010

FEI Number: 20-5034516

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEL MAZO, JOSE A
728 SE PARK DR
HIALEAH, FL 33010 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DEL MAZO, JOSE A
Address: 728 SE PARK DR
City-St-Zip: HIALEAH, FL 33010

Title: VP () Delete
Name: MARTINEZ, ANTONIO
Address: 12787 SW 23 ST
City-St-Zip: MIRAMAR, FL 33027

Title: T () Delete
Name: DEL MAZO, LINA
Address: 728 SE PARK DR
City-St-Zip: HIALEAH, FL 33010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JOSE A. DEL MAZO

P

05/04/2009

Electronic Signature of Signing Officer or Director

_____ Date