


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2006 8:00 am
Secretary of State

03-28-2006 90108 036 ***150.00

DOCUMENT # P94000061067	
1. Entity Name FIRST DADE MORTGAGE CORPORATION	

Principal Place of Business 9370 SUNSET DR., #A-110 MIAMI, FL 33173	Mailing Address 9370 SUNSET DR., #A-110 MIAMI, FL 33173
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2. Principal Place of Business 9570 S.W. 107TH AVE. Suite, Apt. #, etc. 203	3. Mailing Address 9570 S.W. 107TH AVE. Suite, Apt. #, etc. 203
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City & State MIAMI, FL.	City & State MIAMI, FL.
Zip 33176	Zip 33176
Country Dade	Country Dade



03222006 Chg-P CR2E034 (11/05)

4. FEI Number 65-0514123	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FERNANDEZ, MARIE I 2142 S.W. 98TH PL MIAMI, FL 33165
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE VS	<input type="checkbox"/> Delete	TITLE VS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FERNANDEZ, JORGE M		NAME FERNANDEZ, JORGE M.	
STREET ADDRESS 9370 SUNSET DR., #A-110		STREET ADDRESS 9570 S.W. 107TH AVE. SUITE 203	
CITY-ST-ZIP MIAMI, FL 33173		CITY-ST-ZIP MIAMI, FL 33176	
TITLE P	<input type="checkbox"/> Delete	TITLE P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME FERNANDEZ, MARIE I		NAME FERNANDEZ, MARIE I	
STREET ADDRESS 9370 SUNSET DR., #A-110		STREET ADDRESS 9570 S.W. 107TH AVE. SUITE 203	
CITY-ST-ZIP MIAMI, FL 33173		CITY-ST-ZIP MIAMI, FL 33176	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: *Marie I Fernandez* 3/23/06 305-598-3333
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #