2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

E.C. Brason Str

SIGNATURE:

DOCUMENT # P95000010875 **FILED** 1. Entity Name Jul 22, 2008 08:00 AM BRASSINGTON MORTGAGE CORPORATION **Secretary of State** Principal Place of Business Mailing Address 1031 IVES DAIRY RD. 1031 IVES DAIRY RD. N. MIAMI BCH, FL 33179 N. MIAMI BCH, FL 33179 2. Principal Place of Business - No P.O. Box # SAME AS ABOVE 3. Mailing Address Suite, Apl. #, etc. Suite, Apt. #, etc. 2nd MOORE CR2E034 (4/08) City & State City & State 4. FEI Number Applied For 65-0556166 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BRASSINGTON, ELLEN C Street Address (P.O. Box Number is Not Acceptable) 1031 IVES DAIRY RD. #228 N. MIAMI BCH, FL 33179 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. Lam familiar with, and accept the obligations of registered agent. (NOTE Registered Agent signature required when reinthating) FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S , allows for the waiver of the \$400.00 DUE BY September 3, 2008 9. Election Campaign Financing \$5.00 May Be late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150,00. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE Change Addition NAME BRASSINGTON, E.C. NAME U00000955755 1031 IVES DAIRY RD #228 STREET ADDRESS STREET ADDRESS 07/22/08-80004-025 150.00 CITY-ST-ZIP N MIAMI BEACH FL 33179 CITY-ST-ZIP TITLE Delete TITLE Change Addition SAME AS ABOUC. NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY+ST-ZIP TILLE ☐ Delete TITLE Change Addition NAME IMANI STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITL & Delete TITLE Change ☐ Add:tion NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITI F ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Deiele Addition TITI F ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP 12. Thereby 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 suppliemental 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.

7-15-05.