


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 30, 2006 08:00 AM
Secretary of State

DOCUMENT # P96000058506 1. Entity Name 1ST SECURITY MORTGAGE BANC, INC.	
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Principal Place of Business 1111 KANE CONCOURSE, #502 BAY HARBOR ISLAND, FL 33154	Mailing Address 1111 KANE CONCOURSE, #502 BAY HARBOR ISLAND, FL 33154
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DO NOT WRITE IN THIS SPACE



08292006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0684829	Applied For 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 SMITH, AINSLEY S 1111 KANE CONCOURSE, #502 BAY HARBOR ISLAND, FL 33154

**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO SMITH, AINSLEY 20220 NW 3 AVE MIAMI, FL 33169
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08/30/06-80001-013 150.00

**DO NOT WRITE
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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: 	Date: 8/29/06	Daytime Phone #: 305 964-0846
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		