2004 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000064058

FILED Nov 04, 2004 Secretary of State

Entity Name: TRUST INVESTMENT GROUP MORTGAGE DIVISION, INC.

Current Principal Place of Business:

New Principal Place of Business:

4000 PONCE DE LEON BLVD

8800 S.W. 102ND. STREET MIAMI, F 33176 US

SUITE 470 CORAL GABLES, FL 33146 US

Current Mailing Address:

New Mailing Address:

4000 PONCE DE LEON BLVD SUITE 470

8800 S.W. 102ND. STREET MIAMI, FL 33176 US

CORAL GABLES, FL 33146 US

FEI Number: 65-0699530

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CUELLAR, AHYIUN 1021 S.W. 74TH AVENUE VAZQUEZ, LUIS

8800 S.W. 102ND. STREET

MIAMI, FL 33144

MIAMI, FL 33176

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: LUIS VAZQUEZ

11/04/2004

Electronic Signature of Registered Agent

FEI Number Applied For ()

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title:

() Delete

CUELLAR, ROSITA P Name:

1021 SW 74TH AVE Address:

City-St-Zip:

Title:

MIAMI, FL 33144

Title:

() Delete

Name: Address:

CUELLAR, FERNANDO 1021 SW 74TH AVE

MIAMI, FL 33144 City-St-Zip:

Name: Address:

Title:

Title:

Name:

Address:

City-St-Zip:

CF,D

HALL, CLINTON

MIAMI, FL 33176

(X) Change () Addition

CARTER, JEROME

8800 S.W. 102ND. STREET

8800 S.W. 102ND. STREET

City-St-Zip:

MIAMI, FL 33176

() Delete

Title: Name:

() Change (X) Addition

Name:

Address:

VAZQUEZ, LUIS 8800 S.W. 102ND. STREET

Address: City-St-Zip:

City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JEROME CARTER Electronic Signature of Signing Officer or Director CF,D

11/04/2004

Date