

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P96000071900

Entity Name: CAPE MORTGAGE CORP.

FILED  
Oct 10, 2006  
Secretary of State

## Current Principal Place of Business:

240 CRANDON BLVD, SUITE 202  
KEY BISCAYNE, FL 33149

## New Principal Place of Business:

2730 SW 3RD AVENUE  
SUITE 800  
MIAMI, FL 33129

## Current Mailing Address:

240 CRANDON BLVD, SUITE 202  
KEY BISCAYNE, FL 33149

## New Mailing Address:

2730 SW 3RD AVENUE  
SUITE 800  
MIAMI, FL 33129

FEI Number: 65-0690923

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOWMAN, ROBERT M  
240 CRANDON BLVD, SUITE 202  
KEY BISCAYNE, FL 33149 US

## Name and Address of New Registered Agent:

LOWMAN, ROBERT M  
2730 SW 3RD AVENUE  
SUITE 800  
MIAMI, FL 33129 US

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: ROBERT M. LOWMAN

10/10/2006

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: D ( ) Delete  
Name: LOWMAN, ROBERT M  
Address: 240 CRANDON BLVD, SUITE 202  
City-St-Zip: KEY BISCAYNE, FL 33149

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: LOWMAN, ROBERT M  
Address: 2730 SW 3RD AVENUE SUITE 800  
City-St-Zip: MIAMI, FL 33129

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT M. LOWMAN

D

10/10/2006

Electronic Signature of Signing Officer or Director

Date