2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 21, 2005 08:00 AM Secretary of State **DOCUMENT # P96000080729** LOAN OFFICER RESOURCE CENTER, INC. Principal Place of Business Mailing Address 9000 SHERIDAN STREET 9000 SHERIDAN ST. PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024 04122005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0698477 Not Applicable \$8.75 Additional Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FIGUEROA, EVA 1011 SW 115TH AVENUE DO NOT WRITE PEMBROKE PINES, FL 33025 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. Signature typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS in the explanation of the page of the page of the control of the c PD TITLE NAME FIGUEROA-MISHKOFF, EVA STREET ADDRESS 9000 SHERIDAN STREET, #123 CITY-ST-ZIP PEMBROKE PINES, FL 33024 — 1100000321893 04/21/05-80097-006 155.00 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify 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 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 attachmost with an address, with all other tipe empowered.

FILED