2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000008591

City-St-Zip:

MIAMI, FL 33177

Entity Name: TRI-COUNTY EXPRESS MORTGAGE CORPORATION

FILED May 01, 2009 Secretary of State

| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | |
|---|--|--|---|--|------------------------------|--|
| 1601 N. P SUITE 214 PEMBRON | | L 33026 | | | | |
| Current Mailing Address: | | | New Maili | New Mailing Address: | | |
| 1601 N. P SUITE 214 PEMBRON | | L 33026 | | | | |
| FEI Number | : 65-0802629 | FEI Number Applied For () | FEI Number Not Appl | icable () Certif | icate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and | Name and Address of New Registered Agent: | | |
| The above | ALM AVE. (E PINES, F named enti | L 33026 US ty submits this statement for the pu | urpose of changing i | s registered office o | r registered agent, or both, | |
| in the State | e of Florida. | | | | | |
| SIGNATU | | ronic Signature of Registered Ager | -+ | | Date | |
| Election Car | ce with s. 607 | .193(2)(b), F.S., the corporation did not sing Trust Fund Contribution(). | receive the prior notic | | FFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P CAMPOS, J. 20116 SW 1 MIAMI, FL 3 | 29 AVE | Title: Name: Address: City-St-Zip: | ()Chang | e () Addition | |
| Title: Name: Address: City-St-Zip: | VP CAMPOS, J. 20116 SW 1 HOMESTEA | | Title: Name: Address: City-St-Zip: | VP (X) Chang CAMPOS, MARIO C 1601 N.PALM AVE. SU PEMBROKE PINES, FI | | |
| Title: Name: Address: | S CAMPOS, J. 20116 SW 1 | | Title: Name: Address: | () Chang | e () Addition | |

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: MARIO CAMPOS VP 05/01/2009