

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P98000035330

Entity Name: SYSTEM 1 MORTGAGE CORP.

FILED
Sep 23, 2005
Secretary of State

Current Principal Place of Business:

435 NW 124 ST
MIAMI, FL 33168

New Principal Place of Business:

Current Mailing Address:

435 NW 124 STREET
MIAMI, FL 33168

New Mailing Address:

FEI Number: 65-0828559

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: MANSON, CHRISTOPHER
Address: 435 NW 124 ST
City-St-Zip: NORTH MIAMI, FL 33168

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: MATIAS, OLGA
Address: 435 NW 124 ST
City-St-Zip: NORTH MIAMI, FL 33168

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: CHRISTOPHER MANSON

PSDT

09/23/2005

Electronic Signature of Signing Officer or Director

Date