2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P99000020945

1. Entity Name

CAPITAL BANKERS MORTGAGE CORPORATION



Principal Place of Business

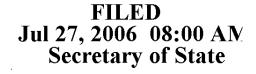
7200 NW 7TH STREET

SUITE 100 MIAMI, FL 33126 Mailing Address

7200 NW 7TH STREET

SUITE 100

MIAMI, FL 33126





DO NOT WRITE IN THIS SPACE

07202006 No Chg-P

CR2E034 (11/05)

4. FEI Number 65-1013203 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Daytime Phone #

6. Name and Address of Current Registered Agent

RODRIGUEZ, RODOLFO 7200 NW 7TH STREET SUITE 100 MIAMI, FL 33126

SIGNATURE:

DO NOT WRITE IN THIS SPACE

			3	
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	Agent signature required when reinstating)	DATE	
FILE NOW!!! FEE IS \$550.00 9. Election Campaign Finance Trust Fund Contribution.			\$5:00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO RODRIGUEZ, RODOLFO A 7200 NW 7TH STREET MIAMI, FL 33126			U00000572437
TITLE NAME STREET ADDRESS CITY-ST-ZIP				07/27/06-80006-017 SSO.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME		.1	,	
STREET ADDRESS - CITY-ST-ZIP	اللها الشبكا لوالم لا المسلم المشاهريسات على) 12-در سمیسی ، سیس <i>ان د</i> رو	mi i i i i i i i i i i i i i i i i i i	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplier and its 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 of Irustee empowered the 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 attachment with an address, with all other like empowered.				

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR