

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000048216

FILED
Sep 30, 2004
Secretary of State

Entity Name: THE MORTGAGE EXCHANGE, INC.

Current Principal Place of Business:

649 US HWY ONE
#18
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

649 US HWY ONE
#18
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 65-0922635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KRAFT, JOHN
216 2ND LN
WEST PALM BEACH, FL 33418 US

Name and Address of New Registered Agent:

KRAFT, JOHN
216 2ND LN
PALM BEACH GARDENS, FL 33418 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: _____

Electronic Signature of Registered Agent

09/30/2004

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: KRAFT, JOHN K
Address: 216 2ND LANE
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: JOHN K. KRAFT

Electronic Signature of Signing Officer or Director

PRES

09/30/2004

Date