

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000059045

FILED
Jan 15, 2004
Secretary of State

Entity Name: ALPHA MORTGAGE GROUP, INC.

Current Principal Place of Business:

1421 TIMBERLANE ROAD
SUITE 120-10
TALLAHASSEE, FL 32312 US

Current Mailing Address:

1421 TIMBERLANE ROAD
SUITE 120-10
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

1471 TIMBERLANE ROAD
SUITE 120-10
TALLAHASSEE, FL 32312 US

New Mailing Address:

P.O. BOX 14501
TALLAHASSEE, FL 32317 US

FEI Number: 65-0930749

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARBULU, ROBERTO
1421 TIMBERLANE ROAD
SUITE 120
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

ARBULU, ROBERTO
P.O. BOX 14501
TALLAHASSEE, FL 32317 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: ROBERTO ARBULU

01/15/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VTD () Delete
Name: ARBULU, ROBERTO
Address: 1705 N. STATE ROAD 7
City-St-Zip: MARGATE, FL 33063 US

Title: PD () Delete
Name: ARBULU, MARIANNE
Address: 1705 N. STATE ROAD 7
City-St-Zip: MARGATE, FL 33063 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VTD (X) Change () Addition
Name: ARBULU, ROBERTO
Address: P.O. BOX 14501
City-St-Zip: TALLAHASSEE, FL 32317 US

Title: PD (X) Change () Addition
Name: ARBULU, MARIANNE
Address: P.O. BOX 14501
City-St-Zip: TALLAHASSEE, FL 32317 US

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: ROBERTO ARBULU

VTD

01/15/2004

Electronic Signature of Signing Officer or Director

Date