### **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

#### DOCUMENT # S67337

E.F. HUTTON MORTGAGE CORPORATION



Principal Place of Business

2000 S. DIXIE HIGHWAY

SUITE 100 MIAMI, FL 33133 Mailing Address

2000 S. DIXIE HIGHWAY

SUITE 100

MIAMI, FL 33133

# **FILED** Apr 27, 2006 8:00 am Secretary of State

04-27-2006 90204 012 \*\*\*150.00

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### DO NOT WRITE IN THIS SPACE

03302006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0320351

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ABBASSI, RAY 2000 S DIXIE HWY #100 MIAMI, FL 33133

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

## DO NOT WRITE IN THIS SPACE

<ol> <li>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.</li> </ol>						
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  OATE						
FILE NOW!!I FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			· · ·	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ABBASSI, RAY 2000 S. DIXIE HWY., STE. 100 MIAMI, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
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 STREET ADDRESS CITY-SI-ZIP						
12. I hereby certify that the information supplied with this filling does not challify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like enjapowered.						

ING OFFICER OR DIRECTOR