

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V52451

FILED
Jan 05, 2005
Secretary of State

Entity Name: MIZRAHI FAMILY MORTGAGE CORPORATION

Current Principal Place of Business:

1005 9 ST
1ST FLOOR
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

1611 ELDONLAS COURT
STONE MOUNTAIN, GA 30087

New Mailing Address:

FEI Number: 65-0424092 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZAMIR, ODDER
1005 9 ST
1ST FLOOR
MIAMI BEACH, FL 33139 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ZAMIR, ODDER (MIZRAHI)
Address: 1611 ELDONLAS COURT
City-St-Zip: STONE MOUNTAIN, GA

Title: D () Delete
Name: ADIVHAGIT (MIZRAHI),
Address: KIRIAT SHMUEL
City-St-Zip: ISRAEL,

Title: D () Delete
Name: SHABAT, RIVKA (MIZRAHI)
Address: MEM GIMAC
City-St-Zip: JERUSALEM,

Title: D () Delete
Name: MIZRAHI, RACHEL
Address: SHOSHANA 7
City-St-Zip: JERUSALEM, IS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: ODDER ZAMIR

_____ Electronic Signature of Signing Officer or Director

PR

01/05/2005

_____ Date