SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # F9800004150

Country

9. Name and Address of Current Registered Agent

MORTGAGE MATE, INC.

Principal Place of Business 11150 W. OLYMPIC BLVD., STE, 1160 LOS ANGELES CA 90064

Principal Place of Business

JEYNSON, RICHARD

1714 S.W. 22ND STREET BOYNTON BEACH FL 33426

Suite, Apt. #, etc.

City & State

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Zip

Mailing Address

2a. Mailing Address

City & State

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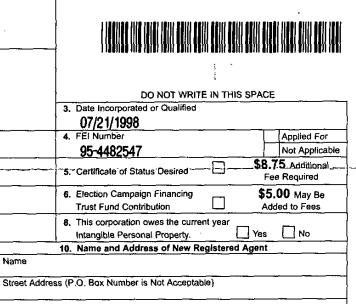
Zip

Suite, Apt. #, etc.

11150 W. OLYMPIC BLVD., STE. 1160 LOS ANGELES CA 90064

FILED Jul 08, 1999 8:00 am Secretary of State

07-08-1999 90009 019 ***550.00



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Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

Country

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GNATURE .		41075	Salata di Assarta Jaset	une required when reinstating) DATE
	Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS		13.	ure required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
2. TLE	P OFFICERS AND DIRECTOR		1,1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	REINER, MITCHELL A	DELETE :	1.2 NAME	Change
AME				į.
REET ADDRESS	11150 W. OLYMPIC BLVD., STE. 1160	•	1.3 STREET ADDRESS	
TY-ST-ZIP	LOS ANGELES CA 90064		1.4 CITY-ST-ZIP	
TLE }	S	DELETE	2.1 TITLE	Change Addition
VME	STEREN, JAY M		2.2 NAME	
REET ADDRESS	11150 W. OLYMPIC BLVD., STE. 1160		2.3 STREET ADDRESS	
TY-ST-ZIP	LOS ANGELES CA 90064		2.4 CITY-ST-ZIP	
πE		DELETE	3.1 TITLE	Change Addition
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REET ADDRESS		i	3.3 STREET ADDRESS	
TY-ST-ZîP			3.4 CITY-ST-ZIP	
TLE		DELETE	4.1 TITLE	Change Addition
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REET ADDRESS			5.3 STREET ADDRESS	
Y-ST-ZIP			5.4 CITY-ST-ZIP	
LE .		DELETE	6.1 TITLE	Change Addition
WE			6.2 NAME	
REET ADDRESS	}		6.3 STREET ADDRESS	
Y-ST-ZIP			6.4 CITY-ST-ZIP	<u> </u>

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of an attachment with an oddress.

IGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Date

Daytime Phone #