

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995**  
**AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)**

**PROFIT CORPORATION ANNUAL REPORT 1995**



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Morham  
 Secretary of State  
 DIVISION OF CORPORATIONS

**APPROVED AND FILED**  
 95 JUL 14 PM 1:44  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**DOCUMENT # K80620 (3)**  
 1. Corporation Name  
**CREATIVE FINANCING INC CFI MORTGAGE CORPORATION.**

Principal Place of Business Mailing Address  
 10540 SO FEDERAL HWY 10540 SO FEDERAL HWY  
 PORT ST LUCIE FL 34952 PORT ST LUCIE FL 34952

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 580 VILLAGE BLD		26		04/17/1989		06/30/1994	
22 STE 360		27		4. FEI Number		Applied For	
23 W. PALM BCH, FLORIDA		28		65-0127741		Not Applicable	
24 33409		25 USA		5. Certificate of Status Desired		X \$0.75 Additional Fee Required	
29		30		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
29		30		8. This corporation has liability for intangible tax under s. 193.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CASTORO, VINCENT 10540 S FEDERAL HWY PORT ST LUCIE FL 34952				81 Name VINCENT CASTORO			
				82 Street Address (P.O. Box Number is Not Acceptable) 580 VILLAGE BLD STE 360			
				83			
				84 City W. PALM BEACH FL 85 Zip Code 33409			

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.  
 SIGNATURE VINCENT CASTORO - PRESIDENT DATE 7/5/95

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	VD	1.1 TITLE	Change	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>			
NAME	CASTORO, CHRISTOPHER C.	12 NAME					
STREET ADDRESS	10540 S FEDERAL HWY	13 STREET ADDRESS		580 VILLAGE BLD - STE 360			
CITY-ST-ZIP	PORT ST LUCIE FL	14 CITY-ST-ZIP		W. PALM BEACH, FL 33409			
TITLE	PD	2.1 TITLE	Change	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>			
NAME	CASTORO, VINCENT JOHN	22 NAME					
STREET ADDRESS	10540 S FEDERAL HWY	23 STREET ADDRESS		580 VILLAGE BLD - STE 360			
CITY-ST-ZIP	PORT ST LUCIE FL	24 CITY-ST-ZIP		W. PALM BEACH, FL 33409			
TITLE		3.1 TITLE					
NAME		32 NAME		200001540122			
STREET ADDRESS		33 STREET ADDRESS		-07/18/95--01080--007			
CITY-ST-ZIP		34 CITY-ST-ZIP		***233-75			
TITLE		4.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>			
NAME		42 NAME					
STREET ADDRESS		43 STREET ADDRESS					
CITY-ST-ZIP		44 CITY-ST-ZIP					
TITLE		5.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>			
NAME		52 NAME					
STREET ADDRESS		53 STREET ADDRESS					
CITY-ST-ZIP		54 CITY-ST-ZIP					
TITLE		6.1 TITLE		Change <input type="checkbox"/> Addition <input type="checkbox"/>			
NAME		62 NAME					
STREET ADDRESS		63 STREET ADDRESS					
CITY-ST-ZIP		64 CITY-ST-ZIP					

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 or the receiver or liquidator empowered to execute this report as required by Chapter 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if correct, or on an attachment with an address.  
 SIGNATURE: VINCENT CASTORO - PRES DATE 7/5/95 407 687-1595

CR2E034 (3/95)