2001 UNIFORM BUSINESS REPORT (UBR) FILED Feb 13, 2001 08:00 AM DOCUMENT # P9200009599 1. Entity Name **Secretary of State** PHOENIX MORTGAGE CORPORATION Principal Place of Business Mailing Address 500 N E SPANISH RIVER BLVD 500 N E SPANISH RIVER BLVD STE 106 STE 106 BOCA RATON FL BOCA RATON FL33431 33431 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0380919 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name FORMAN ROBERT FORMAN ROBERT 200 E. LAS OLAS BLVD. Street Address (P.O. Box Number is Not Acceptable) 2101 WEST COMMERCIAL BLVD **SUITE 1400** BOCA RATON FL33433 US City Zip Code FT. LAUDERDALE 8. 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. 02/13/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 \$5.00 May Be Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE VP ☐ Delete TITLE X Addition CR2E034 (11/00) ☐ Change MAME NAME SYLVIA RAVINSKY STREET ADDRESS 7631 NW 47TH DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS 33067 ☐ Delete TITLE VP X Change NAME MENNELLA FRANK NAME RYAN RAVINSKY STREET ADDRESS 6844 QUEEN FERRY CIR STREET ADDRESS 7631 NW 47TH DR CITY-ST-ZIP BOCA RATON \mathbf{FL} CITY-ST-ZIP CORAL SPRINGS FL33067 ☐ Delete TITLE X Change ☐ Addition RAVINSKY SEYMOUR NAME RAVINSKY SEYMOUR STREET ADDRESS 7077 MONTRICO DRIVE STREET ADDRESS 7631 NW 47TH DR CITY-ST-ZIP BOCA RATON 33433 CITY-ST-ZIP CORAL SPRINGS 33067 FL. TITLE Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SEYMOUR RAVINSKY D 02/13/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayturne Phone #