

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P95000055826 (8)**

1. Corporation Name
UNION ONE MORTGAGE CORPORATION



Principal Place of Business
**12314 N.W. 11TH LANE
MIAMI FL 33182**

Mailing Address
**12314 N.W. 11TH LANE
MIAMI FL 33182**

3. Date Incorporated or Qualified
07/19/1995

3a. Date of Last Report

4. FET Number
65-0595778

Applied For
 Applied For
 Not Applicable

5. Certificate of Status Desired
 \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution
 \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes
 Yes No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

24. Country

25. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

30. **DADE**

9. Name and Address of Current Registered Agent

**NONES, RAFAEL L
7171 CORAL WAY
#317
MIAMI FL 33155**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. Zip Code

FL

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 _____ DATE _____

12. OFFICERS AND DIRECTORS

DELETE

TITLE **D**

NAME **MIJARES, OVIDIO**

STREET ADDRESS **4200 S.W. 149TH COURT**

CITY-ST-ZIP **MIAMI FL 33185**

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

1. TITLE

12. NAME

13. STREET ADDRESS

14. CITY-ST-ZIP

Change Addition

2. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

Change Addition

3. TITLE

32. NAME

33. STREET ADDRESS

34. CITY-ST-ZIP

Change Addition

4. TITLE

42. NAME

43. STREET ADDRESS

44. CITY-ST-ZIP

Change Addition

5. TITLE

52. NAME

53. STREET ADDRESS

54. CITY-ST-ZIP

Change Addition

6. TITLE

62. NAME

63. STREET ADDRESS

64. CITY-ST-ZIP

Change Addition

**400001796584
-04/26/96--01081--022
***200.00**

2
4.26

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 119.07(3)(k), 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 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 change or on an attachment with an address.

SIGNATURE: **OVIDIO MIJARES** PRESIDENT (305) 273-9442

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)