# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 17, 2001 8:00 am**
**Secretary of State**
05-17-2001 91359 050 ***150.00

0203632

767701

DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000027959

1. Entity Name
HOME MORTGAGE LENDING OF AMERICA CORP.

| Principal Place of Business | Mailing Address |
|---|---|
| 9361 SW 40TH ST<br>OFFICE FRONT<br>MIAMI FL 33165 | 9361 SW 40TH ST<br>OFFICE FRONT<br>MIAMI FL 33165 |

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 9361 SW 40th Street<br>Office Front<br>Bird Bowl Shopping Center | 9361 SW 40th Street<br>Office Front<br>Bird Bowl Shopping Center |
| City & State: Miami, Florida 33165 | City & State: Miami, Florida 33165 |
| Zip / Country | Zip / Country |

4. FEI Number 65-0909628 ☐ Applied For ☐ Not Applicable

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

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| LE FRAN,, ODALIS G<br>9361 SW 40TH ST<br>MIAMI FL 33165 | Name: Odalis Gonzalez<br>Street Address (P.O. Box Number is Not Acceptable): 9361 SW 40th Street<br>Bird Bowl Shopping Center<br>City: Office Front Miami FL Zip Code 33165 |

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.

SIGNATURE: Odalis Gonzalez 4-17-01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS $150.00**
**After MAY 1, 2001 Fee will be $550.00**
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

| 11. OFFICERS AND DIRECTORS | | | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>GONZALEZ, ODALIS<br>9361 SW 40TH ST<br>MIAMI FL 33165 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition<br>Gonzalez, Odalis , President<br>9361 SW 40th Street<br>Miami, Fl 33165 |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP<br>MUJICA, ADELINA<br>9361 SW 40TH ST<br>MIAMI FL 33165 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☒ Change ☐ Addition<br>Pedroso, Vanessa , Vice<br>9361 SW 40th StreetPresident<br>Miami, Fl 33165 |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>GONZALEZ, ALEJANDRO<br>9361 SW 40TH ST<br>MIAMI FL 33165 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>PEDROSO, VANESSA<br>9361 SW 40TH ST<br>MIAMI FL 33165 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | ☐ Change ☐ Addition |

CR2E034 (10/00)

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:** Odalis Gonzalez 4/17/01 305-480-0002
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #