## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000019323

1. Corporation Name

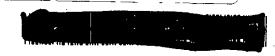
CONTINENTAL MORTGAGE GROUP CORP.

Principal Place of Business

Mailing Address

## FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90062 037 \*\*\*150.00



165 SOUTH BAYSHORE DRIVE #1002 IAMI FL 33133	2665 SOUTH BAYSHORE DRIV MIAMI FL 33133	VE #1002						
				DO NOT WRITE IN TH	IIS SPAC	E		
				3. Date Incorporated or Qualifed				
				03/08/1995				
Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For		
	26			65-0570661	ľ	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		.75 Additional		
City & State 28			-	6. Election Campaign Financing Trust Fund Contribution		5.00 May Be dded to Fees		
Zip Count	ry Žip	Country		8. This corporation owes the current year Intangible				
25 29 30		]		Personal Property Tax.				
9. Name and Addr	ess of Current Registered Agent			10. Name and Address of New Registere	d Agent			
WEISER, WARREN	P.	81	Name					
2665 S. BAYSHORE DRIVE			Street Address (P.O. Box Number is Not Acceptable)					
SUITE 1002								
MIAMI FL 3313	3	83						
		84	City			Zip Code		
onice or registered agent, or both	tions 607.0502 and 607.1508, Florida Statutes, n, in the State of Florida. Such change was autho tept the obligations of, Section 607.0505, Florida	orized by t	named cor he corporat	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changi ointment	ng its registered as registered		
GNATURE			_					
Signature, typed or printed name	e of registered agent and title if applicable. (NOTE: Reg	ustered Agent	tignature requir	ed when reinstating) DATE				

SIGNATURE	Signature, typed or printed name of registered agent and title if	applicable. (NOTE:	Registered Agent signature require	d when reinstating)	DATE	
12.	OFFICERS AND DIRE	13.	ADDITIONS/CHANGES TO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change	Addition
NAME	WEISER, WARREN P.		12 NAME			
STREET ADDRESS		#1002	1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33133		1.4 CITY-ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE	····	Change	Addition
NAME	- •	*	2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY-ST-ZIP	•		
ពារ		☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			
STREET ACCRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE	······································	☐ Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
City-St-zip			44 CITY-ST-ZIP			
TITLE		C OELETE	5.1 TITLE		☐ Change	Addition
NAME			52 NAME		-	
STREET ADDRESS			5.3 STREET ADDRESS	•		
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	Addition
VAME !			6.2 NAME		_ •	-
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			

14. 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 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

WARREN P. WEISER

4127/99

(305)854-7342