2000 UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # L03297** AMERICAN INVESTMENT & MORTGAGE CORP. Principal Place of Business Mailing Address C/O ELISEO J. FERRER C/O ELISEO J. FERRER 175 FONTAINEBLEAU BVLD STE 2E 175 FONTAINEBLEAU BYLD STE 2E MIAMI FL 33172-4511 MIAMI FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc.

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

City & State

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

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12.

TITLE NAME

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

TITLE

NAME

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NAME

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

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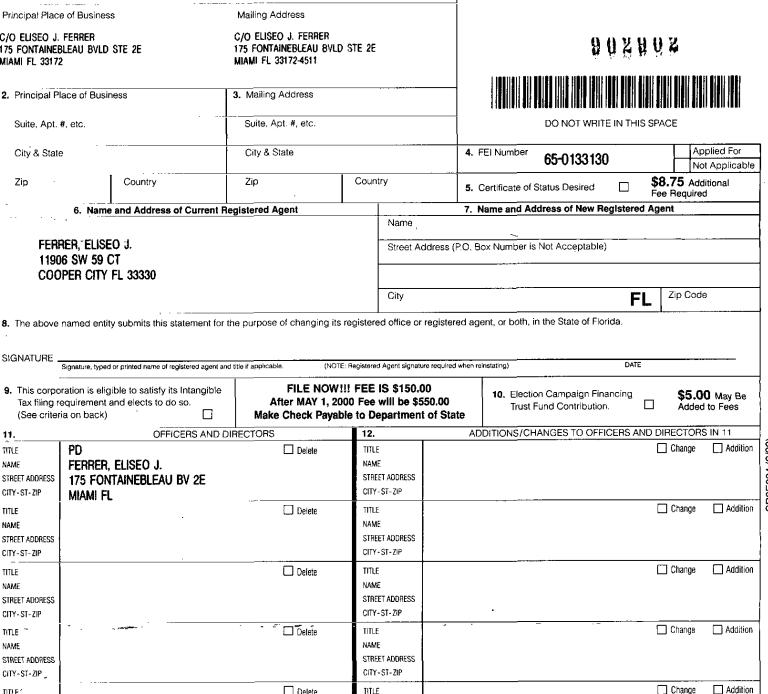
CITY-ST-ZIP

Name

City

FILED Jan 20, 2000 8:00 am Secretary of State

01-20-2000 90132 049 ***150.00



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 received or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if the property of the corporation or the received or trusted empowered at one and appears in Block 12 if the property of the corporation of the corporation or the received execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if ress, with all other like empowered. changed, or on an attachment wi

CITY-ST-ZIP

City & State

FERRER, ELISEO J.

9. This corporation is eligible to satisfy its Intangible

FERRER, ELISEO J.

MIAMI FL

175 FONTAINEBLEAU BV 2E

Tax filing requirement and elects to do so.

(See criteria on back)

11906 SW 59 CT COOPER CITY FL 33330

Zip

SIGNATURE

11.

TITLE

TITLE NAME

TITLE

NAME

TITLE

NAME

TITLE 1

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

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CITY-ST-7IP

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CITY-ST-ZIP

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CITY-ST-ZIP

VATURE AND TYPED OR PRINTED NAME OF SIGNING OF

☐ Change

☐ Addition