I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY JANARO JONES

Electronic Signature of Signing Officer/Director Detail

1111 BRICKELL AVE **10TH FLOOR** BRICKELL, FL 33131 US

FEI Number: 36-4844549

Name and Address of Current Registered Agent:

JONES, JEFFREY J 23914 SW 109TH PLACE HOMESTEAD, FL 33032 US

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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	PRES	Title	VP
Name	JONES, DEBORAH	Name	JONES, JEFFREY JANARO
Address	1120 NW 182ND ST	Address	23914 SW 109TH PL
City-State-Zip:	MIAMI GDNS FL 33169	City-State-Zip:	HONESTEAD FL 33032
Title	TREASURER		
THE	INLAGUNEN		
Name	HILL, LYNETTE		
Address	3806 SW 52ND AVE		
City-State-Zip:	PEMBROKE PARK FL 33023		

Certificate of Status Desired: No

FILED Apr 09, 2021 Secretary of State 8546112637CC

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16000067091

Entity Name: THE MORTGAGE DOCTOR'S INC

Current Principal Place of Business:

1111 BRICKELL AVE 10TH FLOOR BRICKELL, FL 33131

Current Mailing Address:

V.P.

Date

Date