2004 FOR PROFIT CORPORATION ANNUAL REPORT

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMÁS BARTELMO, PRESIDENT

SIGNATURE:

Secretary of State **DOCUMENT # 175880** 02-20-2004 90019 028 ***150.00 J.I. KISLAK MORTGAGE CORPORATION Principal Place of Business Mailing Address 7900 MIAMI LAKES DR. W. 7900 MIAMI LAKES DR. W. MIAMI LAKES, FL 33016 MIAMI LAKES, FL 33016 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01212004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-0762940 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent RODRIGUE, CHRISTY Street Address (P.O. Box Number is Not Acceptable) 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES, FL 33016 Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE . TITLE KISLAK, JAY I. KISLAK, JAY I. NAME NAME 7900 MIAMI LAKES DR. W. 7900 MIAMI LAKES DRIVE WEST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI LAKES, FL MIAMI LAKES, FL 33016 VS TITLE ☐ Delete TITLE VΡ **KX**Change ☐ Addition LUBOW, CHERYL NAME NAME LUBOW, CHERYL STREET ADDRESS 7900 MIAMI LAKES DRIVE WEST STREET ADDRESS 7900 mlami lakes drive west Miami lakes, fl 33016 west MIAMI LAKES, FL CITY-ST-ZIP DVST TITLE ☐ Delete TITLE **K**Change ☐ Addition BARTELMO, THOMAS NAME NAME BARTELMO, THOMAS STREET ADDRESS 7900 MIAMI LAKES DRIVE WEST STREET ADDRESS 7900 MIAMI LAKES DRIVE WEST CITY-ST-ZIP MIAMI LAKES, FL 33016 CITY-ST-ZIP MIAMI LAKES, FL 33016 AS TITLE TITLE **EX**Delete Change Addition VRUA... NAME GLICK, CHERYL NAME BRAUN, STEPHEN STREET ADDRESS 7900 MIAMI LAKES DRIVE WEST STREET ADDRESS 7900 mlami lakes objye west CITY-ST-ZIP MIAMI LAKES, FL 33016 CITY-ST-ZIP XXChange TITLE ΑV ☐ Delete TITLE ☐ Addition RODRIGUEZ, CHRISTY NAME RODRIGUEZ, CHRISTY NAME 7900 MIAMI LAKES DRIVE WEST STREET ADDRESS STREET ADDRESS 7900 MIAMI LAKES DRIVE WEST CITY-ST-ZIP CITY-ST-ZIP HIALEAH, FL 33016 MIAMI LAKES, FL. 33016 SVP. -- ---TITLE -XX Delete TITLE .. Change . . Addition BIALY, KENNETH NAME NAME STREET ADDRESS 7900 MIAMI LAKES DR W STREET ADDRESS HIALEAH, FL 33016 CITY-ST-ZIP 12. 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 10 or Block 11 if

FILED

Feb 20, 2004 8:00 am

305-364-4106

Daytime Phone #