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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 535264

(6)

FLORIDA INTERNATIONAL MORTGAGE CO. Principal Place of Business Mailing Address 10300 SUNSET DRIVE 10300 SUNSET DRIVE SUITE 411 SUITE 411 MIAMI FL 33173 MIAMI FL 33173-3003					
U\$		US		3. Date Incorporated or Qualified 05/06/1977	3a. Date of Last Report 10/02/1996
21	Place of Business	2a. Mailing Address 26		4. FEI Number 59-1763455	Applied For Not Applicable
Suite, Ap 22		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta 23		City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z(p) 24	Country 25	Zip 29	Country 30		Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Regis	
				DE LAS CUEVAS, MARIO	
STE - 30				Address (P.O. Box Number is Not Acceptable 300 S.W. 72 ST. St	UITE 411
, ML	AMI FL 33143		83 84 Cúv_		
				AMI	FL 85 Zip Code 33173
office or agent 1 SIGNATURE	Signar inc. typ- dior printed name of registered a	gent and to (it applicable (NOT	authorized by the colorida Statutes. E. Registered Agont signature		DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
THEF	DP IFOLIA	DELETE	1.1 TITLE	DPS	Change Addition
NAME	INGUANZO, JESUS		1.2 NAME	DE LAS CUEVAS, MARI	0
STREET ACKRES!			1.3 STREET ADDRESS	10300 S.W. 72 ST.	SUITE 411
CHY-S1-ZF	MIAMI FL		1.4 CiTY-ST-ZiP	MIAMI, FL 33173.	
TILF	DS CONTAINT TARIADA (I CAN	DELETE	2.1 TITLE	INGUANZO, JESUS	Change Addition
MAIME	GONZALEZ-TABLADA, ILEAN 2610 PIONEER RD	M	2.2 NAME	8365 S.W. 46 ST.	
STREET ADDRESS	HUNTSVILLE AL		2.3 STREET ADDRESS	MIAMI, FL	
Calma Shaziri Tarak	HOMIOVILLE AL	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
TI*[{		□"] nerest	3.1 IIILE 3.2 NAME		C outside C vorinous
NAME CONTRACTOR	\downarrow		1		
STREET ADDRESS	`		3.3 STREET ADDRESS		
City - St. 74P Title		T DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
		LJ DECT	4. 2 NAME		The Australia The Manifest
NAME expect stranger			4.3 STREET ADDRESS		
STREET ADDRESS	`\				
CHY SI-ZE	.	DELETE	44 CITY - ST - ZIP 51 TITLE		Change Addition
NAME		_ section	5.2 NAME		- Surviye First Location
	c l		5.2 NAME 5.3 STREET ADDRESS		
STEEL ADORESS	5.1		5 3 5 ORFEL ADDRESS	1	

6.4 CITY-ST-ZIP 14. I do 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 eath; 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 many do, or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE 6.2 NAME

SIGNATURE:

CHY-ST-ZIP

STREET ADDRESS.

COLY - ST - 7IP

TITLE

NAME

DELETE

Change

Addition

FILED

May 12 1997 8:00am

Secretary of State