

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2002 8:00 am
Secretary of State

02-06-2002 90024 007 ***158.75

DOCUMENT # F01000004000

1. Entity Name

MECHANIC MORTGAGE GROUP N.E., INC.

Principal Place of Business

**50 CHARLES LINDBERGH BLVD., SUITE 400
 UNIONDALE NY 11553**

Mailing Address

**50 CHARLES LINDBERGH BLVD., SUITE 400
 UNIONDALE NY 11553**

401544



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

(Suite, Apt. #, etc.)

(Suite, Apt. #, etc.)

City & State

City & State

4. FEI Number

11-3290563

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MECHANIC, DAVID

353 S.E. PORT ST. LUCIE BLVD.

PORT ST. LUCIE FL 34984

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible

Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00

**After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

**P
 MECHANIC, DAVID B
 83-15 116TH STREET
 KEW GARDENS NY 11418**

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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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

David Mechanic
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**DAVID
 MECHANIC 1/18/02 516-229-2331**

Date

Daytime Phone #

CR2E034 (9/01)