FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

F11366 **DOCUMENT #**

(4)

1. Corporation Name

P.S. MORTGAGE & INVESTMENT CORP.								
	76TH TERR.	Mailing Address P. O. BOX 830363 MIAMI FL 33283-0763				31 0 B 311 01614 0	B B B	
POST OFFICE BOX 830363 MIAMI FL 33173 US		US		3. Date Incorporated or Qualified 3a. Date of Last Report 12/17/1980 03/06/1995				
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEt Number Applied For			Applied For	
21		26		59-2046131 Not Applicab			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zφ	Country	Zio	Country	·	8. This corporation has liability for i	intangible ta		
24	25	29 33283-0363 30			· · ·*	□No		
=:1	9. Name and Address of Current	<u></u>	·T		10. Name and Address of New R	egistered /	Agent	
			81	Name				
SOLDINGER, PHYLLIS I			82	Street Add	dress (P.O. Box Number is Not Acceptab	ile)		
	S.W. 76TH TERR.		_					
MAMI	FL 33173		83	1				
			84	City		FL	85 Zıç	Code
SIGNATURE	n, and accept the obligations of, Sections of Sections				ration submits this statement for the purard of directors. I hereby accept the appu	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF			
TITLE	PD	☐ DELETE	1. 1 TITLE			L	Change	Addition
NAME	SOLDINGER, PHYLLIS I		1.2 NAME					
STREET ADDRESS	10656 SW 76TH TERRACE		1.3 STREE	T ADDRESS				
CITY-S1-ZIP	MIAMI FL	E3 DUETE	1.4 CHTY- 2 1 TITLE				Change	Addition
TITLE	SOLDINGER, DONALD	SO DINIOR DONALD				L	ી ભાજાતૈદ	☐ Youron
NAME	10656 SW 76TH TERRACE		2.2 NAME	1	•			
STREET ADDRESS	MIAMI FL			T ADDRESS				
CITY-\$1-ZIP TITLE	THE STATE OF THE S	☐ DELETE	24 CHTY- 3 1 THILE			Г	Change	Addition
NAME			3 2 NAME			-		
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NAME		_	4.2 NAME					
STREET ADDRESS				T ADDRESS				
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TITLE		☐ DELETE	5 1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5 3 STREE	T ADDRESS				
CHTY-ST-ZIP			5 4 CiTY-	ST-ZIP				
TITLE		☐ DELETE	6 1 TITLE			[Change	Addition
NAME			62 NAME					
STREET ADDRESS			63 STREE	T ADDRESS				
CITY - \$1 - 710			64 CITY-	ST-7IP				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 changed, or on an attachment with an address.

SIGNATURE: ...

CR2E034 (12/95)