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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	F960000000	768
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1. Corporation Name

1011	IANIAN MORTGAGE, INC.				I ANDREADD INCOME TO A DELLA BURNIA		IXII)	8 CIREL ESEL 1881
Principal Place	of Business	Mailing Address						A BILAL LANG SAME
225 HIGHWAY 3	35	225 HIGHWAY 35						
2ND FLOOR	~	2ND FLOOR						
RED BANK NJ (DO NOT WRITE IN THIS SPACE				
US		U\$			3. Date Incorporated or Qualifer	d		
					02/15/1996			
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number		-	pplied For
21		26		,	22-1470679			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	×		Additional lequired
22		27 Oits 8 Otals						· ··
City & State) 	City & State		6. Election Campaign Financing	<u>-</u>		May Be to Fees	
23	Country	Zip Country		Trust Fund Contribution			to rees	
Zip	Country	Zip	_ `		8. This corporation owes the cu	irrent year int	angibie □Yes	` ⊠ No
24	25		0		Personal Property Tax. 10. Name and Address of New	Pagistared		JAQ1 0
	9. Name and Address of Current	t Registered Agent	81	Name	10. Name and Address of New	registered	ngeni.	
RRAI	NNOCK, G. STEVEN			11441115				
	S. AUSTRALIAN AVE., STE. 400)	82	Street Addre	ess (P.O. Box Number is Not Accep	otable)		
	T PALM BEACH FL 33409	•	83					
; 1120	TALIII DENOTITE 00100		63					
*			84	City	-187	17.	85 Zip	Code
<u> </u>					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	 	shansing if	a saciatarad
11. Pursuant i	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	2 and 607.1508, Florida Statutes of Florida. Such change was aut	i, the above horized by	e-named corpo the corporatio	oration submits this statement for the on's board of directors. I hereby acc	ept the appoi	cnanging it ntment as r	s registered egistered
agent. I ai	n familiar with, and accept the obligat	tions of, Section 607.0505, Floric	la Statutes.		•	,		
SIGNATURE								
	Signature, typed or printed name of registered agen		 	it signature required	when reinstating) ADDITIONS/CHANGES TO C	DATE AN	ID DIDECT	ODE IN 12
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO C	ILLICEUS VI	DINECT	OKS IN 12
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RED BANK NJ 07701 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED AND TYPED OR PRINTED RAND TYPED OR PRINTED RANG OF SIGNING OFFICER OR DIRECTOR