FILED

☐ Change

Change

☐ Addition

Addition

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mar 03, 2003 8:00 am § **Secretary of State** F96000002731 03-03-2003 90440 017 ***150.00 1. Entity Name DMC CAPITAL MARKETS, INC. Principal Place of Business Mailing Address 7578 EL CAJON BOULEVARD 7578 EL CAJON BOULEVARD LA MESA CA 91941-4646 LA MESA CA 91941-4646 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 33-0149431 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PARACORP INCORPORATED Street Address (P.O. Box Number is Not Acceptable) 236 EAST 6TH AVENUE TALLAHASSEE FL 32303 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Make Check Payable to Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD TITLE ☐ Delete TITLE ☐ Change ☐ Addition KRUEGER, RON NAME NAME STREET ADDRESS 7578 EL CAJON BLVD STREET ADDRESS CITY-ST-ZIP LA MESA CA 91941-4646 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME TRASK, WILLIAM E NAME STREET ADDRESS 7578 EL CAJON BLVD STREET ADDRESS CITY-ST-ZIP LA MESA CA 91941-4646 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME KRUEGER, FRANK NAME STREET ADDRESS 7578 EL CAJON BLVD STREET ADDRESS CITY-ST-7IP LA MESA CA 91941-4646 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition

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

NAME

TITLE

NAME

TITLE

NAME

☐ Delete

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STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

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CITY-ST-ZIP

DOLLAR MORTGAGE CORPORATION

7578 EL CAJON BOULEVARD LA MESA, CALIFORNIA 91941

TELEPHONE (619) 589-5256 FACSIMILE (619) 463-1876

Wednesday, February 26, 2003
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tate to call.

William E. Trask

WET/jm Enclosure(s)