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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 15 1998 8:00am Secretary of State

DOCUMENT # F9700004598 (5) DIRECT MORTGAGE PARTNERS, INC. Principal Place of Business Mailing Address 580 VILLAGE BLVD., STE. 120 S80 VILLAGE BLVD., STE. 120							
						- I HADDINAD JULK IRINI YORUN OONNY OONNY KONNY DENNY RINGH BINNY TERBU LONY YEBU	
WEST PALM BEACH FL 33409 WEST PALM BEACH FL 33409							
						DO NOT WRITE IN THIS SPACE	
						3, Date Incorporated or Qualified	
0-1	Plane of D. circus		n			09/02/1997 4. FEI Number	
2. Principal Place of Business		2a. Mailing Address				100 100 000 00	
Suite, Apt.	# elc	Suite Apt. #, etc.				APPULD ION Not Applicable \$8.75 Additional	
22		27]				5. Certificate of Status Desired Fee Required	
City & Stat	le		City & State			6. Election Campaign Financing \$5.00 May Be	
23		28	k : 1			Trust Fund Contribution Added to Fees	
Zip	Country	Zip		Country	y	8. This corporation owes or has paid the current year Intangible	
24	25	29		30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Currer	t Registered	Agent		1 4	10. Name and Address of New Registered Agent	
	T CORPORATION SYSTEM			81	Name		
	00 SOUTH PINE ISLAND ROAD				Street Add	Street Address (P.O. Box Number is Not Acceptable)	
PLANTATION FL 33324				83			
				63	1		
				84	City	B5 Zip Code	
del Disservent	to the provisions of Capliana COZ OF	0 and CO2 15	30 Florida Ptot	des des ses	is named set	FL D	
	registered agent, or both, in the State am familiar with, and accept the obliga-	of Florida, Su ations of, Sect	ch change was ion 607. 0 505, F	authorized b lorida Statute	y the corpora s.	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or poilted name of registered age	ot and trie it applic	able (NC	TE Registered Ag	eni signatura requ	ired when reinstating) DATE	
12.	OLFICERS AN	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP CONTRACTOR		☐ DELETE	1.17ITLE		Change Addition	
	NAME LASHBROOK, DON M			1.2 NAME			
STREET ADDRESS 580 VILLAGE BLVD., STE. 120				1	I ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 3340	19 	DELETE	1.4 C/TY-	ST-ZIP	Change Addition	
TITLE	CASTORO, VINCENT J JR.		☐ DELETE	2.1 THLE	1	Change Addition	
NAME OTOTES ADDRESS	580 VILLAGE BLVD., STE. 12	Λ		2.2 NAME	* +0000000		
STREET ADDRESS	WEST PALM BEACH FL 3340				T ADDRESS		
CITY-ST-ZIP TITLE			DELETE	2. 4 CITY- 3.1 TiTLE	פויגור	Change Addition	
NAME	CASTORO, CHRISTOPHER C			3.2 NAME			
STREET ADDRESS	580 VILLAGE BLVD., STE. 12				T ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 3340			3.4. CITY-	1		
TITLE			DELETE	41 TITLE		Change Addition	
NAME				4. 2 NAME			
STREET ADDRESS				4.3 STREE	T ADDRESS		
CITY-ST-ZIP				4.4 CITY - :	ST-2IP		
TITLE			DELETE	5.1 TITLE	· T	☐ Change ☐ Addilion	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET	t address		
CITY-ST-ZIP				5.4 CITY -	ST-21P		
TITLE			DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME				6.2 NAME			
STREET ADDRESS	•				T ADDRESS		
CITY - ST - ZIP	1			6.4 CITY-1		Cooling 110 07/9Will Elected Ctatutes Lituriber conflict that the information	

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this annual report or suppliemental 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 ex on an attachment with an address.