## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 08, 2002 8:00 am Secretary of State

DOCUMENT #F9700005053				05-08-2002 90124 025 ***150.00	
Fidelity Mortgage Inc.					
	DO NOT WRITE	IN THIS S	PACE		
1000	al Place of Business Woodbury Road  Apt. #, etc. e 300  State	3. Mailing Address 1000 Woodb Suite, Apt. #, etc. Suite 200 City & State	oury Road	DO NOT WRITE IN THIS SE	PACE ·
Wood 117	bury, NY	Woodbury,	NY Country	4. FEI Number 11-3360263	Applied For Not Applicable
-17	97 03A	11/9/	USA	Fe	8.75 Additional
			Name	7. Name and Address of Current Registered A	gent
DO NOT WRITE CT Corporation System					
IN THIS SPACE  Street Address (P.O. Box Number is Not Acceptable)					
		.0_	1200 S	outh Pine Island Road	
City D1					
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)  OATE					
9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back)      January 1 - May 1 Fee is \$150,00  After May 1, Fee is \$550,00  Amended UBR is \$61,25  Make Check Payable to Department of State				10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
11.	OFFICERS AND DI	RECTORS	o o ocpardient di Stat	<u> </u>	
NAME	President, Direct Miller, Hugh	cor	TITLE		8
STREET ADDRESS CITY+ST-ZIP	14 Eagle Chase, W	loodbury, NY	NAME STREET ADDRESS CITY+ST+ZIP		8 (12/01)
TITLE	Secretary, Direct	or 9/	IFILE		CR2E034B
NAME STREET ADDRESS	Miller, Marc		NAME		SR2E
CITY-ST-ZIP	39 Cherry Lane, S	yosset, NY 1791	STREET ADDRESS CITY+ST+ZIP		
-TITLE NAME	Treasurer, Direct	or	TITLE		
STREET ADDRESS	lBlass. Richard		NAME		
CITY-ST-ZIP	22 Wharton Place,	Melville, <del>11747 ——</del>	STREET ADDRESS: CITY+ST-7IP	DO NOT WRITE	=
TITLE NAME	NI	11/4/	TITLE		**************************************
STREET ADDRESS			name Street address	IN THIS SPACE	
CITY-ST-ZIP			CITY-ST-ZP		
TITLE   NAME		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	TILL		
STREET ADDRESS			NAME STREET ADDRESS		
CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		
TITLE NAME			TITLE		
STREET ADDRESS		·	NAME CTREE ADDRESS		
CITY-ST-ZIP			STREET ADDRESS City - St - Zip		
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 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 on an					