FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG -4 AM 10:06

DOCUMENT # **G44693** **(1)**

1. Corporation Name
FIRST EQUITABLE MORTGAGE COMPANY, INC.

Principal Place of Business	Mailing Address
3015 N OCEAN BLVD #C-114 FT. LAUDERDALE FL 33308	3015 N OCEAN BLVD #C-114 FT. LAUDERDALE FL 33308

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/22/1983
3a. Date of Last Report: 02/07/1994

2. Principal Place of Business	2a. Mailing Address
21 7800 RED ROAD	26 7800 RED ROAD
Suite, Apt. #, etc. 22 # 124	Suite, Apt. #, etc. 27 # 124
City & State 23 S. MIAMI, FL	City & State 28 S. MIAMI, FL
Zip / Country 24 33143 / 25 U.S.A.	Zip / Country 29 33143 / 30 USA

4. FEI Number: 59-2310268 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
MYERS, RALPH 3015 N OCEAN BLVD #C-114 FT. LAUDERDALE FL 33308	81 Name: ALAN L. DRECKSLER 82 Street Address (P.O. Box Number is Not Acceptable): 7800 RED ROAD 83: #124 84 City: S. MIAMI FL 85 Zip Code: 33143

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] PRESIDENT 06-05-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PS	1.1 TITLE		☒ Change ☐ Addition
NAME	DRECKSLER, ALAN L.	1.2 NAME		
STREET ADDRESS	3015 N. OCEAN BLVD. C114	1.3 STREET ADDRESS	7800 RED ROAD #124	
CITY-ST-ZIP	FT. LAUDERDALE FL	1.4 CITY-ST-ZIP	S. MIAMI, FL 33143	
TITLE	VT	2.1 TITLE		☒ Change ☐ Addition
NAME	DRECKSLER, CHARLES L.	2.2 NAME		
STREET ADDRESS	3015 N. OCEAN BLVD. C114	2.3 STREET ADDRESS	7800 RED ROAD #124	
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	S. MIAMI, FL 33143	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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 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.

SIGNATURE: [signature] 06-05-95 305-662-1921
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
CHARLES L. DRECKSLER, V.P.

0214656 CP