

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **G44825** (9)

1. Corporation Name
A. SWEET MORTGAGE CORP.



Principal Place of Business: **3343 N.E. 33RD STREET FT. LAUDERDALE FL 33308**
Mailing Address: **3343 N.E. 33RD STREET FT. LAUDERDALE FL 33308**

3. Date Incorporated or Qualified: **06/16/1983**
3a. Date of Last Report: **08/14/1995**
4. FEI Number: **59-2331237**
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

2. Principal Place of Business
21 **3310 N.E. 33rd St.**
Suite, Apt. #, etc.:
22
City & State: **Ft. Lauderdale, Fl**
23
Zip: **33308** Country: **U.S.A.**
24
25
2a. Mailing Address
26 **3310 N.E. 33rd St.**
Suite, Apt. #, etc.:
27
City & State: **Ft. Lauderdale, Fla**
28
Zip: **33308** Country: **U.S.A.**
29
30

9. Name and Address of Current Registered Agent
**CARSON, WAYNE, ESQ
7901 SW 36TH ST.
ROLLING HILLS CENTER
DAVE FL 33328**

10. Name and Address of New Registered Agent
81 Name: **WAYNE CARSON, ESQ.**
82 Street Address (P.O. Box Number is Not Acceptable): **7901 S.W. 36th St.**
83 **Rolling Hills Center**
84 City: **Davie** FL 85 Zip Code: **33328**

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: **WAYNE CARSON** *Wayne Carson* Date: **4/29/96**
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating.)

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	SWEET, ANNETTE	
STREET ADDRESS	8343 N.E. 33RD STREET	
CITY-ST-ZIP	FT LAUDERDALE, FL 33308	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	3310 N.E. 33rd Street
1.4 CITY-ST-ZIP	Ft. Lauderdale, Fl 33308
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 included 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: *Annette Sweet* **Annette Sweet** Date: **4/29/96** Daytime Phone #: **954-956-7720**
Signature and typed or printed name of signing officer or director

CR2E034 (12/95)