

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 02, 1999 8:00 am
Secretary of State

04-02-1999 90075 039 ***150.00

DOCUMENT # G45588

1. Corporation Name
PMC CAPITAL, INC.

Principal Place of Business
4000 HOLLYWOOD BLVD.
STE 435-S
HOLLYWOOD FL 33021

Mailing Address
4000 HOLLYWOOD BLVD.
STE 435-S
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/14/1983

4. FEI Number

59-2338439

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 owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 18111 Preston Rd.

2a. Mailing Address

26 18111 Preston Rd

Suite, Apt., etc.

22 Suite 600

Suite, Apt., etc.

27 Suite 600

City & State

23 Dallas, Texas

City & State

28 Dallas, Texas

Zip

24 75252

Country

25 US

Zip

29 75252

Country

30 US

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CBD ☐ DELETE

NAME ROSEMORE, FREDRIC M.
STREET ADDRESS 4000 HOLLYWOOD BLVD. STE 435-S
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE DPS ☐ DELETE

NAME ROSEMORE, LANCE B
STREET ADDRESS 4000 HOLLYWOOD BLVD. STE 435-S
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE DVT ☐ DELETE

NAME ROSEMORE, ANDREW B
STREET ADDRESS 4000 HOLLYWOOD BLVD. STE 435-S
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE D ☐ DELETE

NAME BORISH, IRVIN
STREET ADDRESS 211 WILDWOOD CIRCLE
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE D ☐ DELETE

NAME RUWITCH, LEE
STREET ADDRESS 601 BRICKELL KEY DR.
CITY-ST-ZIP MIAMI FL 33131

TITLE D ☐ DELETE

NAME GREENBERG, MARTHA
STREET ADDRESS UNDERWD RD AT 43RD N HWY
CITY-ST-ZIP RUSSELLVILLE AL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE CBD ☒ Change ☐ Addition

1.2 NAME Rosemore Fredric M.
1.3 STREET ADDRESS 18111 Preston Rd. Ste. 600
1.4 CITY-ST-ZIP Dallas, TX 75252

2.1 TITLE DPS ☒ Change ☐ Addition

2.2 NAME Rosemore, Lance B.
2.3 STREET ADDRESS 18111 Preston Rd. Ste. 600
2.4 CITY-ST-ZIP Dallas, TX 75252

3.1 TITLE DVT ☒ Change ☐ Addition

3.2 NAME Rosemore, Andrew B.
3.3 STREET ADDRESS 18111 Preston Rd. Ste. 600
3.4 CITY-ST-ZIP Dallas, TX 75252

4.1 TITLE D ☒ Change ☐ Addition

4.2 NAME Borish, Irvin
4.3 STREET ADDRESS 18111 Preston Rd. Ste 600
4.4 CITY-ST-ZIP Dallas, TX 75252

5.1 TITLE D ☒ Change ☐ Addition

5.2 NAME Ruwitch, Lee
5.3 STREET ADDRESS 18111 Preston Rd. Ste 600
5.4 CITY-ST-ZIP Dallas, TX 75252

6.1 TITLE D ☒ Change ☐ Addition

6.2 NAME Greenberg, Martha
6.3 STREET ADDRESS 18111 Preston Rd. Ste 600
6.4 CITY-ST-ZIP Dallas, TX 75252

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/98)