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

DOCUMENT # K10314

1. Corporation Name

MORTGAGE MARKETING SERVICES, INC.

Principal Place 4001 NE 22 AV FT. LAUDERDAL	Æ	Mailing Address 4001 NE 22 AVE FT. LAUDERDALE FL	33308							
						DO NOT WRITE IN THIS SPACE				
						3.	Date Incorporated or Qualifed			
2 Principal Di	lace of Business	2a. Mailing Address				4	12/31/1987 FEI Number			Applied For
— '	lace of business	26	•			•	65-0026647		-	lot Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc								Additional .
22		27				5.	Certifcate of Status Desired			Required
City & State	e ·	City & State				6.	Election Campaign Financing		\$5.00	May Be
23		28				<u> </u>	Trust Fund Contribution	<u> </u>	Added	to Fees
Zip	Country	Zip	Cou	intry		8.	This corporation owes the curre	ent year Int		
24	25	29]	30	_		40	Personal Property Tax.		Yes	□No
	9. Name and Address of Curr	ent Registered Agent		81	Name	10.	Name and Address of New R	egisterea .	Agent	<u> </u>
CAB	RERA, MIKE									
	OUTH UNIVERSITY DRIVE			82	Street Addres	ss P	O. Box Number is Not Accepta	ARA	BLKD	ı
	E 339			83						
-PLAI	NTATION FL-33324				5011	ट	26/			
				84	CHP/A	J-77	79-770N	Fl	85 3	3321
office or re agent. I ar	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change :	was authorized	i by ti	-named corpor he corporation	ration n's bo	n submits this statement for the pard of directors. I hereby accep	purpose of it the appoi	changing it ntment as r	s registered egistered
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable.	(NOTE: Registered	Agent	signature required v	when re	einstating)	DATE		
40										
12.		AND DIRECTORS	13.				ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	D	AND DIRECTORS DELE		TLE			ADDITIONS/CHANGES TO OFF	ICERS AN	D DIRECT	
	D RISI, GERALD N						ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	D RISI, GERALD N 4001 NE 22 AVE.		TE 1.1 TH	AME	ADDRESS		ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE NAME	D RISI, GERALD N	□ DELE	TE 1.1 TH 1.2 NA 1.3 ST 1.4 CF	ME REET/ TY-ST-	ADDRESS		ADDITIONS/CHANGES TO OFF	ICERS AN	Change	Addition
TITLE NAME STREET ADDRESS	D RISI, GERALD N 4001 NE 22 AVE.		TE 1.1 TH 1.2 NA 1.3 ST 1.4 CF	ME REET/ TY-ST-	ADDRESS		ADDITIONS/CHANGES TO OFF	FICERS AN		Addition
TITLE NAME STREET ADDRESS CITY- ST-ZIP	D RISI, GERALD N 4001 NE 22 AVE.	□ DELE	TE 1.1 TH 1.2 NA 1.3 ST 1.4 CF 2.1 TH 2.2 NA	AME TREET / TY-ST- TLE AME	ADDRESS - ZIP		ADDITIONS/CHANGES TO OFF	FICERS AN	Change	Addition
TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE	D RISI, GERALD N 4001 NE 22 AVE. FT LAUDERDALE FL	□ DELE	TE 1.1 TH 1.2 NA 1.3 ST 1.4 CF 2.1 TH 2.2 NA	AME TREET / TY-ST- TLE AME	ADDRESS		ADDITIONS/CHANGES TO OFF	FICERS AN	Change	Addition
TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP	D RISI, GERALD N 4001 NE 22 AVE.	☐ DELE	TE 1.1 TT 1.2 NA 1.3 ST 1.4 CF 2.1 TT 2.2 NA 2.3 ST 2.4 CF 2.4 CF 2.4 CF 2.5 ST 2.4 CF 2.4 CF 2.5 ST	TY-ST-TLE AME TREET	ADDRESS - ZIP		ADDITIONS/CHANGES TO OFF	- icers an	☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D RISI, GERALD N 4001 NE 22 AVE. FT LAUDERDALE FL	□ DELE	TE 1.1 TT 1.2 NA 1.3 ST 1.4 CT 2.1 TT 2.2 NA 2.3 ST 2.4 CT TE 3.1 TT TE 3.1	TY-ST- TLE AME TREET / TTY-ST	ADDRESS - ZIP		ADDITIONS/CHANGES TO OFF	FICERS AN	Change	Addition Addition
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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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

FILED

Apr 06, 1999 8:00 am Secretary of State

04-06-1999 90086 042 ***150.00