
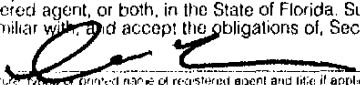
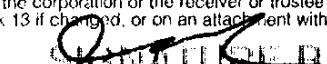


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS																																																																																																																																					
DOCUMENT # K62189 (1) 1. Corporation Name PYRAMID MORTGAGE & TRUST, INC.																																																																																																																																									
Principal Place of Business 35-080 US HWY 19 PALM HARBOR FL 34684 US			Mailing Address 35-080 US HWY 19 PALM HARBOR FL 34684-1925 US																																																																																																																																						
2. Principal Place of Business 21 8380 Baymeadows Rd. Suite, Apt. #, etc. 22 Suite 9 City & State 23 Jax FL Zip 24 32256 Country 25 USA		2a. Mailing Address 26 Suite, Apt. #, etc. 27 same City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 01/31/1989 3a. Date of Last Report 04/19/1996 4. FEI Number 59-2932139 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																																																																																																					
9. Name and Address of Current Registered Agent ORR, THOMAS F 8519 THRASHER COURT NEW PORT RICHEY FL 34654			10. Name and Address of New Registered Agent 81 Name David B. Lewis 82 Street Address (P.O. Box Number is Not Acceptable) 8380 Baymeadows Rd. 83 Suite 9 84 City Jax FL 85 Zip Code 32256																																																																																																																																						
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:  David B. Lewis - President 2/4/97 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE																																																																																																																																									
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14. I do 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. SIGNATURE:  David B. Lewis 2/5/97 904-448-8344 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																																																																									

CR2E034 (9/96)