

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # K74271 (3)

1. Corporation Name

THE REAL ESTATE & MORTGAGE GROUP, INC.

Principal Place of Business

9733 NW 41 ST
MIAMI FL 33178
US

Mailing Address

9733 NW 41 ST
MIAMI FL 33178
US

FILED

1995 JUL 13 AM 9:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
03/21/1989

3a. Date of Last Report
04/21/1994

4. FEI Number
65-0209440

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 **3550 BISCAYNE BLVD**

2a. Mailing Address

26 **3550 BISCAYNE BLVD**

Suite, Apt. #, etc.

22 **SUITE 607**

Suite, Apt. #, etc.

27 **SUITE 607**

City & State

23 **MIAMI FL**

City & State

28 **MIAMI FL**

Zip

24 **33137**

Country

25 **USA**

Zip

29 **33137**

Country

30 **USA**

9. Name and Address of Current Registered Agent

**LAW, IAN B.
9731 NW 41 ST
MIAMI FL 33178**

10. Name and Address of New Registered Agent

81 Name

IRA B. PRICE

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

9130 S. DADE LAND BLVD

83

SUITE 1705

84 City

MIAMI

FL

85 Zip Code
33156

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 **PDT**
NAME **LAW, IAN R.**
STREET ADDRESS **4844 NW 94 DORAL PLACE**
CITY - ST - ZIP **MIAMI FL 33178**

TITLE **DST**
NAME **LAW, GRACIELA B.**
STREET ADDRESS **4844 NW 94 DORAL PLACE**
CITY - ST - ZIP **MIAMI FL 33178**

TITLE **V**
NAME **COLON, ROBERT**
STREET ADDRESS **9708 NW 41ST ST**
CITY - ST - ZIP **MIAMI FL 33178**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PDT** ☒ Change ☐ Addition
1.2 NAME **LAW, IAN R.**
1.3 STREET ADDRESS **3550 BISCAYNE BLVD, SUITE 607**
1.4 CITY - ST - ZIP **MIAMI FL 33137**

2.1 TITLE **VDS** ☒ Change ☐ Addition
2.2 NAME **LAW GRACIELA B**
2.3 STREET ADDRESS **3550 BISCAYNE BLVD, SUITE 607**
2.4 CITY - ST - ZIP **MIAMI FL 33137**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ 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 110.07(3)(b), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Here