May 10, 1999 8:00 am Secretary of State

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## 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 # K74271

1. Corporation Name

THE REAL ESTATE & MORTGAGE GROUP, INC.

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Principal Place	e of Business	Mailin	ng Address						1 (\$6(\$1))	. 411 18811 61616 1					
3550 BISCAYNE BLVD		3550 (	3550 BISCAYNE BLVD												
SUITE 601			SUITE 601				DO NOT WRITE IN THIS SPACE								
MIAMI FL 33137 US		MIAMI US	MIAMI FL 33137				3. Date Incorporated or Qualifed								
03		US						•	03/21/19						
2 Dringingt DI	lace of Business	2a M	ailing Address					4.	FEI Number					Apı	plied For
	lace of Business	26	annig Accided					'	65-02094						t Applicable
Suite Ant	# etc		uite. Apt. #, etc.							·			\$8		Additional
Suite, Apt. #, etc.		27	<u>├</u>					5.	Certificate of	Status Desir	ed				quired
City & State			ity & State					6.	Election Car	npaign Finan	cina	C=-1	\$5	00	May Be
23	-	28						•	Trust Fund (						o Fees
Zip	Country	Zi	p	Cou	ntry			8.	This corpora	tion owes the	e currer	nt year Int	angible		
24	25	29		30					Personal Pro				ŬYe		□No
	9. Name and Address of Curn		ed Agent	.17.7				10.	Name and	Address of N	lew Re	gistered	Agent		
			<u> </u>		81	Name	е								
LAW	/, IAN							/D	NO Day Maria	haula blak Aa		101			
	BISCAYNE BLVD.				82	Stree	t Addres	SS (P	P.O. Box Num	ider is not ac	серіао	<del>(C</del> )			
SUIT	TE 601			i	83										
	MI-FL 33137			,											
	-				84	City						FL	85	Zip C	Code
11. Pursuant	to the provisions of Sections 607.05	502 and 607.	1508 Florida Statu	tes, the a	hove-		4	ration	n submits this	etatement fo	or the p	urpose of	changi	na ite	registered
agent, i ar	egistered agent, or both, in the Stat m familiar with, and accept the obli	ite of Florida.	Such change was :	authorized	i by ti	the con	poration	n's bo	oard of directo	ors. I hereby	accept	the appoi	ntment	as reg	gistered
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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 adjacement with a property of the corporation of the corporation or the receiver or trustee empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR