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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # K97626

(1)

FUND AMERICA MORTGAGE CORP.

**FILED** Apr 27 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						( redraite BIB serie redie serie siach wire seert Bibre siact bibre brott seer	
175 FONTAINEBLEAU BLVD 175 FONTAINEBLEAU BL SUITE 2J-6 SUITE 2J-6 MIAMI FL 33172 MIAMI FL 33172			BLVD		DO NOT WRITE IN THIS	SPACE	
741111111111111111111111111111111111111	•				3. Date Incorporated or Qualified		
					06/22/1989		
2. Principal P	2a. Mailing Address			4. FEI Number	Applied For		
21		26			65-0128713	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the co		
24	25	29	30			Yes No	
	9, Name and Address of Curr	ent Registered Agent		nel ii	10. Name and Address of New Registered	Agent	
	DAL, RAFAEL			81 Name			
	35 N.W. 8TH ST. #203			82 Street A	Address (P.O. Box Number is Not Acceptable)		
ML	AMI FL 33126						
			Į	83			
				84 City		85 Zip Code	
				′	FI	_   '   '	
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obli	502 and 607.1508, Florida Stat te of Florida. Such change was igations of, Section 607.0505, I	utes, the at s authorized Florida Stat	pove-named d by the corp utes.	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its registered pointment as registered	
SIGNATURE							
44	Signature, typed or printed name of registered a			Agent signature	required when reinstaling) DATE  ADDITIONS/CHANGES TO OFFICERS AN	O DIDEOTORO IN 10	
12.	P\$	ND DIRECTORS  DELETE	13.	T	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition	
TITLE		☐ Deceie	1.1 7(1	}		C CUSURE MODISON	
NAME	VIDAL, RAFAEL 8635 NW 8 STREET #203		1.2 NA	- 1		İ	
STREET ADDRESS			1	REET ADDRESS			
CITY-ST-ZIP	MIAMI FL VP	DELETE		TY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Change Addition	
TITLE	**	∐ DELE <b>te</b>	2.1 10			Change Addition	
NAME	VIDAL, ELIZABETH,		2.2 NA	1		· ·	
STREET ADDRESS	8635 NW 8 ST #203			REET ADDRESS			
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CITY - ST - ZIP				TY-ST-ZIP			
TITLE		DELETE	6.1 TIT	ì		Change Addition	
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET ADDRESS		ļ	
CITY-ST-ZIP			6.4 CI	ry-st-zip			

I hereby certify that the information supplied with this filing does not qualify 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 of the reporter of 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 enlanged, or on any accuracy address.