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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

3.

DOCUMENT #

L08718

BANKERS MORTGAGE & LENDKNG GROUP INC.

Principal Place of Business

Mailing Address

8211 WEST BROWARD BLVD.	SUITE 330
PLANTATION, FL. 33324	

FILED May 06 1997 8:00an Secretary of State								
Date Incorporated or Qualified 8/14/89	3a. Date of 4/9							
FEI Number	• • • • • • • • • • • • • • • • • • • •	Applied For						
65-0202710		Not Applicable						
Certificate of Status Desired	□ \$8	3.75 Additional Fee Required						

						0/14/02	7/ 70	
2. Precipal 8	Pair e of Business	2a. Mailing Add	ress			4. FEI Number		Applied For
21		26				65-0202710		Not Applicable
Suite Apt	n etc	Suite, Apt. #	, etc.			5. Certificate of Status Desired		75 Additional e Required
City & Star	14.	City & State				6. Election Campaign Financing	\$5.	00 May Be
23		28				Trust Fund Contribution		ded to Fees
Zip	Country	Zip	Co	untry		8. This corporation has liability for	ntangible tax und	ler s. 199.032,
24	25	29	30			Florida Statutes	Yes No	
	9. Name and Address of Curre	nt Registered Agent		L		10. Name and Address of New Re	gletered Agent	
				61	Name			
				82	Street Add	dress (P.O. Box Number is Not Acceptate	ele)	
	C .ADAMSON III						,	
	W. BROWARD BLVD. #	330		63				
PLANT	ATION, FL. 33324			84	City		85	Zip Code
							FL	,
11, Parsuant office or agent	to the provisions of Sections 607.05 registered agent, or both in the Stat am tan far with, and accept the oblic	02 and 607,1508, Flori e of Florida, Such char gations of, Section 607	da Statutes, the ange was authorize .0505, Florida Sta	bove d by	e-named cor the corpora s.	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of changi of the appointmen	ng its registered it as registered
SIGNATURI		•						
SIGNATORI	Signature Typed or ported dank of registored ap-	gent and title if applicable	(NOTE Registere	ed Age	ent signature requ	uired when reinstating)	DATE	
12.	OFFICERS AF	VID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		
1-1-1	PRESIDENT/DIRECTO	r Lid	ELETE 1.1 T	ITLE			∐ Cha	nge L. Addition
NAME	DAVID ADAMSON III		1.2 M	IAME				
SPHELYONA	8211 W. BROWARD B		1.3 \$	TREET	ADDRESS			
01°4 St 7°	PLANTATION, FL.3	2224		HTY-5	T - ZIP			
1:1.1	V. PRES/	5524 [_] D	ELETE 2.1 T	ITLE			Cha	nge 🔲 Addition
NAM	PABLO CAMUS		2.2 1	AME				
518H1 \$109ES	1	י מבכיי מעד	•		ADDRESS			
(a)v 81 73:	8211 W. BROWARD B				ST - ZIP			
™ITi€	PLANTATION, FL. 3	3324 🔲 D					Cha	nge [_] Addition
hami				IAME	.			
STREET KIEDRESS			338	STREET	ADDRESS			
C407 ST 752			·····		ST-ZIP			000 1444000
1003		ΠD		ITLE			Cha	nge 🔲 Addition
Maw)				NAME				
SMHTT ADDOCTOR					ADDRESS			
1945 St. 710					ST-Z/P			
"IH -		LJ D		ITLE		00000017	☐ Cha ☐ ☐ ☐	nge Adortion
NAM:				IAME	ļ	00000217 -05/13/97010	02019	
STREET ADDRESS					ADDRESS	***165.00	OF 010	
C Fr. St. 705					ST - ZIP	***103.00		4 5 350
II'U				TITLE			☐ Cha	nge Addition
NAME			621	NAME	ļ			CS
STEEL ACTIVITION			633	STREET	F ADDRESS			5/6/91
	1							-19/7/

51. 5° 76.

14. For bareby 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 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 porporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 18 if changed for on an appearance with an address.

SIGNATURE:

WANT C NUMBER TO DAVID C. ADAMSON III 4/28/97 (954) 452-8222
TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR