

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 14, 2000 8:00 am
Secretary of State

02-14-2000 90164 017 ***150.00

DOCUMENT # L26655

1. Entity Name

NATIONAL MORTGAGE & INVESTMENT CORPORATION, LIM

Principal Place of Business

Mailing Address

1001 NW 5TH WAY
 SUITE 1400
 FT LAUDERDALE FL 33309

P O BOX 21364
 FORT LAUDERDALE FL 33335-1364
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0156473**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

RICHARDS GRANT
2200 SE 21ST ST
FT LAUDERDALE FL 33316

7. Name and Address of New Registered Agent

Name **GRANT RICHARDS**

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

6301 NW 5TH AVE

SUITE 1400

City **FORT LAUDERDALE**

FL

Zip Code

33309

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

01/31/00

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11.

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CDP**
 NAME **RICHARDS, GRANT**
 STREET ADDRESS **2200 S.E. 21ST STREET**
 CITY-ST-ZIP **FT. LAUDERDALE FL**

☐ Delete

TITLE
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 STREET ADDRESS
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☐ Change ☐ Addition

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☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GRANT RICHARDS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/31/00

Date

954 958 1203

Daytime Phone #

CR2E034 (9/99)