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PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #

1, Corporation Name

(3)

STRYDIO MORTGAGE CORP.

| Principal Place of Business | | | | | | | | |
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| % NORMA STRYDIO | | | | | | | | |
| 6840 S.W. 40 ST., SUITE 20 | 12 | | | | | | | |

Mailing Address

% NORMA STRYDIO 6840 S.W. 40 ST. SHITE 202



| Price of Business 24, Mailing Address 11/06/1889 30,118/1985 3 | MIAMI FL 33155 MIAMI FL 33155 | | | | | |
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| Suite, April 8, etc. Suite, April 8, etc. Suite | — · . | - ۱۸ د دستار سا | 2a. Mailing Address | 1 marco | TAPPlied For | \Box |
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| STRYDIO, NORMA | 24 | | | 30 | | |
| STRYDIO, NORMA | | 9. Name and Address of Currer | it Registered Agent | | 10. Name and Address of New Registered Agent | |
| BEAD S.W. 40TH ST. STE 202 MIAMI FL 33155 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes the above presed corporation submiss this statement for the purpose of changing its registered office formation and accept the obligations of Section 607 0505 florids Statutes. Signature: 1 | | | | 81 Name | | |
| BEAD S.W. 40TH ST. STE 202 MIAMI FL 33155 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids Statutes the above presed corporation submiss this statement for the purpose of changing its registered office formation and accept the obligations of Section 607 0505 florids Statutes. Signature: 1 | STRYDIC | D. NORMA | | 80 0 | All (DO Do Marker) Markers (C) | |
| STE 202 MIAMI FL 33155 84 City | | | | 82 Street | Address (P.O. Box Number is Not Acceptable) | |
| MIAMI FL 33155 B4 City FL 85 Zip Code 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 for registered agent, or both, in the State of Florids, Suchrichange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am registered agent, and accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, I am registered agent, I | | | | 83 | | \dashv |
| Section Company Comp | | | | | | İ |
| SIGNATURE | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 2 05 100 | | 84 City | 85 Zip Code | |
| SIGNATURE Superior Methods of the obligations of, Section 607-0505, Florida Statutes Signature Superior name of implement agent and section for contribute Politic Pol | 11. Pursuant to | o the provisions of Sections 607 0502 | and 607 1508 Florida Statutos | the shows period se | FL | |
| SIGNATURE | | | | by the corporation's | prioration submits this statement for the purpose of changing its registered of board of directors. Thereby accept the appointment as registered about 1 am | fice |
| 12 | familiar witi | h, and accept the obligations of, Secti | ion 607.0505, Florida Statutes. | • | The state of the appointment do registered agent, I am | ' |
| 12, | SIGNATURE _ | | | | | - 1 |
| The DP | | | | | | |
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| | Į. | | | 6.3 STREET ADDRESS | | |
| 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 07/200. Elevidor Library | | cording that the information | data at the driver in 12 and 2 and 2 | 6 4 CITY-ST-ZIP | | |

certify that the information indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under early 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 changed, or on an attachment with an address.

SIGNATURE: >

G OFFICER OR DIRECTOR

3-19-96 (305)663-7272