

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **L42653 (0)**

1. Corporation Name

MIAMI FEDERAL MORTGAGE CORPORATION



| | |
|--|--|
| Principal Place of Business | Mailing Address |
| 7221 CORAL WAY #202 MIAMI FL 33155 US | 7221 CORAL WAY #202 MIAMI FL 33155 US |

| | |
|--|--|
| 3. Date Incorporated or Qualified 01/10/1990 | 3a. Date of Last Report 03/09/1995 |
|--|--|

| | |
|--|--|
| 21. Principal Place of Business 116 SW 28 Road | 2a. Mailing Address 116 SW 28 Rd |
| 22. Suite, Apt. #, etc. | 27. Suite, Apt. #, etc. |
| 23. City & State Miami FL | 28. City & State Miami FL |
| 24. Zip 33129 | 25. Country USA |
| 29. Zip 33129 | 30. Country USA |

| | |
|---|---------------------------------------|
| 4. FEI Number 65-0163147 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

9. Name and Address of Current Registered Agent

KENDLE, RICHARD
7221 CORAL WAY
#202
MIAMI BEACH FL 33139

10. Name and Address of New Registered Agent

| | |
|--|-----------------------|
| 81. Name | |
| 82. Street Address (P.O. Box Number is Not Acceptable) | 116 SW 28 Road |
| 83. | |
| 84. City | Miami |
| 85. Zip Code | FL 33129 |

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 or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Richard D. Kendle (Signature, typed or printed name of registered agent and title if applicable) M. Kendall (NOTE: Registered Agent signature required when reinstating) 4/26/96 DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|--|
| TITLE | P <input type="checkbox"/> DELETE | 1.1 TITLE | President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KENDLE, RICHARD | 1.2 NAME | Richard Kendle |
| STREET ADDRESS | 7221 CORAL WAY #202 | 1.3 STREET ADDRESS | 116 SW 28 Road |
| CITY-ST-ZIP | MIAMI FL | 1.4 CITY-ST-ZIP | Miami FL 33129 |
| TITLE | VP <input type="checkbox"/> DELETE | 2.1 TITLE | Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | ALVAREZ, JORGE | 2.2 NAME | Jorge Alvarez |
| STREET ADDRESS | 7221 CORAL WAY #202 | 2.3 STREET ADDRESS | 116 SW 28 Road |
| CITY-ST-ZIP | MIAMI FL | 2.4 CITY-ST-ZIP | Miami FL 33129 |
| TITLE | T <input type="checkbox"/> DELETE | 3.1 TITLE | Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SACKIE, J. LYLE | 3.2 NAME | J. Lyle Sackie |
| STREET ADDRESS | 7221 CORAL WAY #202 | 3.3 STREET ADDRESS | 116 SW 28 Rd |
| CITY-ST-ZIP | MIAMI FL | 3.4 CITY-ST-ZIP | Miami FL 33129 |
| TITLE | S <input checked="" type="checkbox"/> DELETE | 4.1 TITLE | Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | NOA, RATSELL | 4.2 NAME | Albert Jimenez |
| STREET ADDRESS | 7221 CORAL WAY #202 | 4.3 STREET ADDRESS | 116 SW 28 Road |
| CITY-ST-ZIP | MIAMI FL | 4.4 CITY-ST-ZIP | Miami FL 33129 |
| TITLE | <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP | |

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 119.07(3)(k), 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 attachment with an address.

SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 4/26/96 DATE 305 858-8140 Daytime Phone #

CR2E034 (12/95)