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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

	1996	DI	VISION OF C	ORPORATIONS					
DOCU	IMENT # M35	745	(2)						
	RATE MORTGAGE COR	PORATION							
Principal Plac	ce of Business	Mailing Addre	988			1	DBI DUN DIBIK DK	5 0107 <u>1</u> 404	
7380 SW 48TH ST		7380 SW 48TH ST							
MIAMEFL : US	33155	MIAMI FL 3 US	33155				1		
						3. Date Incorporated or Qualified 07/24/1986		of Last Re 3/07/19	
2, Principal F	Place of Business	2a, Mailing Ad	ddress			4. FEI Number			Applied For
1		26				59-2700102			vot Applicable
Suite, Apt	t. #, etc.	Suite, Apt	#, etc.			5. Certificate of Status Desired			Additional Required
fil . City & Sta	nte	City & Sta	ite			6. Election Campaign Financing			May Be
3	p	28				Trust Fund Contribution		Added	to Fees
21() 4	Country [25]	Ζιμ 29	}	Country 30		8. This corporation has liability for Florida Statutes	r intangible ta es ∷∏No	ax under s	199.032,
74	9. Name and Address of Cu			301		10. Name and Address of New		Agent	
				81 N	ame				
	EORGE, M. JEFFREY			82 S	treet Addre	ess (P.O. Box Number is Not Accepta	able)		
	PONCE DE LEON BLVD.			83					
CORA	L GABLES FL 33134								
				84 0	ity		FL	85 Zij	o Code
44 (1)			side Ctatutes	the obere con		ation submits this statement for the s	weens of ab	analos ita e	agistared offer
or regist familiar v	tered agent, or both, in the State of with, and accept the obligations of,	i Florida Such change w	as authorized	, the above-nan I by the corpora	ed corpora tion's boar	ation submits this statement for the p d of directors. I hereby accept the ap	urpose of cha pointment as	anging its r registered	egistered office agent. I am
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centry 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 ceath; that I arm 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 or an attractment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED AME OF SIGNING OFFICER OR DIRECTOR

Date

Date