

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

FILED
May 01 1996 8:00 am
Secretary of State

DOCUMENT # M53619 (6)

1. Corporation Name

AMERILOAN FINANCIAL CORP.

Principal Place of Business

7880 NORTH UNIVERSITY DRIVE, #100
TAMARAC FL 33321-9124

Mailing Address

7880 NORTH UNIVERSITY DRIVE, #100
TAMARAC FL 33321-9124

3. Date Incorporated or Qualified
06/10/1987

3a. Date of Last Report
04/27/1995

4. FEI Number

65-0052371

Applied For
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 500 EAST BROWARD BOULEVARD

26

Suite, Apt. #, etc.
1100

Suite, Apt. #, etc.

27

City & State

City & State

23 FT LAUDERDALE FL

28

Zip

Country

Zip

Country

24 33394

25

USA

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARULANDA CARLOS
3760 NE INVERRARY DR N3P
LAUDERHILL FL 33319

81 Name

MARULANDA, CARLOS A.

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

500 EAST BROWARD BOULEVARD

83

SUITE 1100

84 City

FT LAUDERDALE

FL

85

Zip Code
33394

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

Signature typed or printed name of registered agent and the full address

(Print) Registered Agent Signature (required when changing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME D
MARULANDA, PABLO A.
STREET ADDRESS 18444 NW 9TH COURT
CITY-ST-ZIP PAMBROKE PINES FL

TITLE ☒ DELETE

NAME PDC
MARULANDA, EDGAR
STREET ADDRESS 2684 RIVIERA COURT
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME D
MARULANDA, CESAR
STREET ADDRESS 694 STANTON DR
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME D
MARULANDA, CARLOS
STREET ADDRESS 668 STANTON DRIVE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

DO

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Delete

DO
MARULANDA, CESAR A.

DO

300001828843
-05/20/96--01035--015
***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CARLOS A. MARULANDA

04-29-96

954-463-2900

SG 5-1-96

CR2E034 (12/95)