FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT #DOOOOOOOO

FILED May 27, 2002 8:00 am Secretary of State

1. Entity Name PEOPLE'S MAN	AGEMENT N	lortshat I		02 90474 002 †	***150.00	
DO NOT WRITE	IN THIS S	PACE		÷	· · · · · · · · · · · · · · · · · · ·	
2. Principal Place of Business 1880 NE 158 STREET Suite, Apt. #, etc.	3. Mailing Address 1880 NE 12 Suite, Apt. #, etc.	58 STR	DO NOT WRITE IN THIS SPACE			
N. MIAMI BENCH, FL	City & State N MIAM, BE		4. FEI Number		Applied For Not Applicable	
Zip 33163 Country U.S.A	33162	Country	5. Certificate of Status Desired	Fee I	75 Additional . Required	
			7. Name and Address of Current Registered Agent Name			
IN THIS SPACE		Street Address	Street Address (P.O. Box Number is Not Acceptable) 1 (SR) NE 58 3 TRUET City N. MIRMI BERRY FL Zip Code 3 37/6 >			
The above named entity submits this statement for	the purpose of changing its			• •	33162	

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

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

SIGNATURE

January 1 - May 1. Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25

(NOTE: Registered Agent signature required when reinstating)

10. Election Campaign Financing Trust Fund Contribution.

DATE

\$5.00 May Be Added to Fees

CR2E034B (12/01)

Make Check Payable to Department of State OFFICERS AND DIRECTORS 11, TITLE TITLE JENETHA WILSON BUTLER:P NAME NAME 1880 NE 158 Street STREET ADDRESS STREET ADDRESS CITY-ST-ZIP N Minmi Bonoti, FL 33162 CITY-ST-ZIP NEVILLE Z. BUTLER UP/S. TITLE NAME 1880 HE 158 Street NAME STREET ADDRESS STREET ADDRESS N. Minoni BEDOH, FZ.33162 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP-TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZiP TITLE TITLE

13. I hereby certify that the information supplied with this filling 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 on an attachment with an address, with all other incompared.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

JEVILLEE. BUTLER 05/09/02

People's Management Mortgage Inc

1880 NE 158 Street, North Miami Beach, Fl. 33162-5744 Phone 305-945-6362 ~ Fax 305-949-1459

May 7th, 2002

Uniform Business Report Division of Corporations PO Box 1500 Tallahassee, Fl. 32302

Sir/Madam,

Enclosed please find complete Uniform Business Report and registration Fee This note accompanying this report is to let you know that I did not receive the original report as is customary, and indeed called your office to so inform them. It was as a consequence of my enquiry on May 1st that this report was forwarded to us; it arrived today, after, apparently mailed out on May 7th. In the circumstances I was advised that I should pay the original \$150.00

Thank You.

Yours truly

Secretary

People's Management Mortgage Inc.

Chment 866450 # Pacco 0058 333

33162+5744 30



LORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

DIVISION OF CORPORATIONS
Corporate Records
P.O. Box 6327
Tallahassee, Florida 32314