

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 16, 2002 8:00 am
Secretary of State

09-16-2002 90101 048 ***150.00

DOCUMENT # P00000065099

1. Entity Name

NATIONWIDE MORTGAGE, INC.

Principal Place of Business

**1639 CAPE CORAL PK
CAPE CORAL FL 33901**

Mailing Address

**1639 CAPE CORAL PK
CAPE CORAL FL 33901**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1021601

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SLAJDA, MICHAEL P
6213 PRESIDENTIAL COURT STE B
FORT MYERS FL 33919**

7. Name and Address of New Registered Agent

Name

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

1639 Cape Coral Parkway #105

City

Cape Coral

FL

Zip Code
33907

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9/12/02

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

**FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **SLAJDA, MICHAEL P**
STREET ADDRESS **5204 SW 2 PLACE**
CITY-ST-ZIP **CAPE CORAL FL 33914**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/12/02

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

#P00000065099

NATIONWIDE MORTGAGE, INC.

1639 Cape Coral Parkway, Suite: 105, Cape Coral, Florida 33904

Cell: (239) 633 - 0022, Phone: (239) 549 - 1194, Facsimile: (239) 549 - 5322

Tuesday, September 10, 2002

Re: Late Filing

Dear Department Of State,

I am a new corporation and unfamiliar with the filing requirements. I am truly sorry; I did not know this needed to be filed. Please accept my check for 150.000 dollars. I promise this will never happen again.

Thank you,

M. P. Slajda

Michael P. Slajda