

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 01, 2002 8:00 am**  
**Secretary of State**

05-01-2002 91598 039 \*\*\*150.00

**DOCUMENT # P01000033160**

**1. Entity Name**  
**G & S MORTGAGE CORPORATION**

**Principal Place of Business**

**7811 CORAL WAY  
 SUITE 120  
 MIAMI FL 33155**

**Mailing Address**

**7811 CORAL WAY  
 SUITE 120  
 MIAMI FL 33155**

**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**

**65-1111981**

Applied For

Not Applicable

**5. Certificate of Status Desired** ☐

**\$8.75 Additional  
 Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**GOBERNA, MANUEL J**

**13441 S.W. 53RD STREET  
 MIAMI FL 33175**

Name

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

City

**FL**

Zip Code

**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.**

**SIGNATURE**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**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 \$150.00  
 After May 1, 2002 Fee will be \$550.00  
 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** PSD ☐ Delete  
**NAME** SANTIAGO, FELIPE  
**STREET ADDRESS** 7570 S.W. 31 STREET  
**CITY-ST-ZIP** MIAMI FL 33155

**TITLE** EXECUTIVE VICE-PRESIDENT ☐ Change ☒ Addition  
**NAME** MIGUEL A. MIRANDA  
**STREET ADDRESS** 7020 SW 16 ST  
**CITY-ST-ZIP** MIAMI, FL 33155

**TITLE** VD ☐ Delete  
**NAME** GOBERNA, MILDRED  
**STREET ADDRESS** 13441 S.W. 53RD ST.  
**CITY-ST-ZIP** MIAMI FL 33175

**TITLE** DIRECTOR ☐ Change ☒ Addition  
**NAME** YARINA E. GOBERNA  
**STREET ADDRESS** 13441 SW 53 ST  
**CITY-ST-ZIP** MIAMI, FL 33175

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**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**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**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**

**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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**FELIPE I. SANTIAGO** 04/17/02 305-267-5237

CR2E034 (9/01)