

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90131 015 ***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
7811 CORAL WAY
Suite, Apt. #, etc.
SUITE 107

3. Mailing Address
7811 CORAL WAY
Suite, Apt. #, etc.
SUITE 107

City & State
MIAMI, FL 33155

City & State
MIAMI, FL

Zip
33155 **Country**
MIAMI-DADE

Zip
33155 **Country**
MIAMI-DADE

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

GOBERNA, MANUEL J
13441 S.W. 53RD STREET
MIAMI FL 33175

7. Name and Address of New Registered Agent

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. 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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE PSD ☐ Delete
NAME SANTIAGO, FELIPE
STREET ADDRESS 7570 S.W. 31 STREET
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 EV ☐ Delete
NAME MIRANDA, MIGUEL A
STREET ADDRESS 7020 SW 16 ST
CITY-ST-ZIP MIAMI FL 33155

TITLE D ☐ Delete
NAME GOBERNA, YARINA E
STREET ADDRESS 13441 SW 53 ST
CITY-ST-ZIP MIAMI FL 33175

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

12. 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 10 or Block 11 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

04/21/03 305-267-5237
Date Daytime Phone #

CR2E034 (10/02)