

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Sep 10, 2003 8:00 am**  
**Secretary of State**

09-10-2003 90059 021 \*\*\*150.00

0092645 AV

**DOCUMENT # P01000079784**

1. Entity Name  
**MORTGAGE CAPITAL CORP.**



Principal Place of Business  
**11231 JASMINE HILL CIR.  
BOCA RATON FL 33498**

Mailing Address  
**11231 JASMINE HILL CIR.  
BOCA RATON FL 33498**



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 **65-1129421**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BURATTINI, CARLOS O  
11231 JASMINE HILL CIR.  
BOCA RATON FL 33498**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME **PD**  
STREET ADDRESS **BURATTINI, CARLOS O**  
CITY-ST-ZIP **11231 JASMINE HILL CIR.  
BOCA RATON FL 33498**

TITLE ☐ Delete  
NAME **VD**  
STREET ADDRESS **BURATTINI, ROXANNA**  
CITY-ST-ZIP **11231 JASMINE HILL CIR.  
BOCA RATON FL 33498**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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  
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CITY-ST-ZIP

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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: *Carlos Burattini*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*9/4/03* *561 4775622*  
Date Daytime Phone #

CR2E034 (4/03)

Attachment

80146130

#P0600079784

**www.MtgCapitalCorp.com**

Low Cost Mortgage Loans Through Knowledge and Technology

September 5, 2003

**Florida Department of State  
409 East Gaines Street  
Tallahassee, FL 32399**

**Re: Uniform Business Report**

Dear Sirs:

I called your office to notify you that our corporation had not received a UBR renewal until now which included a late fee. I was advised to notify your office in writing and forward a check for \$150.00 dollars along with the UBR form. Please contact me at 561-477-5622 if you have any questions. Thank you in advance for your prompt attention on this matter.

Sincerely,

*Roxanna Burattini*

Roxanna Burattini  
Mortgage Capital Corp.