

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2004 8:00 am**  
**Secretary of State**

04-30-2004 90281 014 \*\*\*150.00

**DOCUMENT # P01000092245**

**1. Entity Name**  
**BANKERS INTERNATIONAL MORTGAGE CORPORATION**



**Principal Place of Business**

**1401 BRICKELL AVE  
STE 1010  
MIAMI, FL 33131**

**Mailing Address**

**1110 BRICKELL AVE.  
SUITE 806  
MIAMI, FL 33131**

**2. Principal Place of Business**

**3. Mailing Address**

**1401 Brickell Av.**

**Suite, Apt. #, etc.**

**Suite, Apt. #, etc.**

**Suite 1010**

**City & State**

**City & State**

**Miami FL**

**Zip**

**Country**

**Zip**

**Country**

**33131**

**USA**

**04272004**

**Chg-P**

**CR2E034 (10/03)**

**4. FEI Number**

**65-1141098**

**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**

**FORERO, HERNANDO  
1110 BRICKELL AVE.  
SUITE 806  
MIAMI, FL 33131**

**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, 2004 Fee will be \$550.00**

**9. Election Campaign Financing**  
**-Trust Fund Contribution.**

☐

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

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

<b>TITLE</b>	<b>D</b>	<input type="checkbox"/> Delete
<b>NAME</b>	<b>FORERO, HERNANDO</b>	
<b>STREET ADDRESS</b>	<b>1110 BRICKELL AVE. SUITE 806</b>	
<b>CITY-ST-ZIP</b>	<b>MIAMI, FL 33131</b>	
<b>TITLE</b>	<b>PD</b>	<input type="checkbox"/> Delete
<b>NAME</b>	<b>DE FORERO, BEATRIZ</b>	
<b>STREET ADDRESS</b>	<b>1110 BRICKELL AVE. SUITE 806</b>	
<b>CITY-ST-ZIP</b>	<b>MIAMI, FL 33131</b>	
<b>TITLE</b>		<input type="checkbox"/> Delete
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<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>		

<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	

**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.**

*[Handwritten Signature]*