

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

FILED

03 OCT 31 AM 10:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P010000 107897

1. Entity Name

Muller Fiore Mortgage Corporation



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1127 S. Federal Highway

3. Mailing Address

1900 Corporate Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

400 East

City & State

Pompano Beach FL

City & State

Boca Raton FL

Zip

33062

Country

Zip

FL 33433

Country

REINSTATEMENT

DO NOT WRITE IN THIS SPACE

03

4. FEI Number

65-1153596

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

CHARLES SCHER

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

1900 Corporate Blvd # 400 East

City

Boca Raton

FL

Zip Code

33433

**DO NOT WRITE
IN THIS SPACE**

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

January 1 - May 1, Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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: President
NAME: SUZANA FIORE
STREET ADDRESS: 1127 S. Federal Highway
CITY-ST-ZIP: Pompano Beach FL 33062

TITLE: V.P.
NAME: JEFFERSON FIORE
STREET ADDRESS: 1127 S. Federal Highway
CITY-ST-ZIP: Pompano Beach FL 33062

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SUZANA FIORE

10/27/03

561-988-6838

Date

Daytime Phone #

CR2E034B (12/02)

MULLER FIORE MORTGAGE CORP.

127 S. Federal Highway
Pompano Beach, FL 33062

The Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314


Dear Sir:

Re: Muller Fiore Mortgage Corp. P 010000107897

The registered agent for the above corporation changed his address in January 2003. He advised the post office of the change. However, he never received the first or the second reminder to file the annual report for the corporation. As a result we never filed this report until our new accountant asked us if the fee has been paid. We would appreciate it if you would accept the check for \$150.00 for the 2003 year and abate the penalty.

We apologize for any inconvenience caused.

Sincerely,



Suzana Fiore
President