

FILED

03 OCT 15 PM 12:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000039484			
1. Entity Name MORTGAGE LENDER'S GROUP, INC.			
Principal Place of Business 3625 NW 82 AVENUE SUITE 408 MIAMI, FL 33166		Mailing Address 3625 NW 82 AVENUE SUITE 408 MIAMI, FL 33166	
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 54-2062526		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEON RUBIDO, MARLENE ESQ. 8800 WEST FLAGLER STREET, A-106 MIAMI, FL 33144		7. Name and Address of New Registered Agent	
Name		Name	
Street Address (P.O. Box Number is Not Acceptable)		Street Address (P.O. Box Number is Not Acceptable)	
City		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when registering.)</small>			
FILE NOW!! FEES \$150.00 After May 1, 2003 Fee will be \$350.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ANZARDO, CARLOS 9114 N.W. 164 STREET MIAMI LAKES, FL 33018 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: 		Date: 8/1/03 (308) 828-1790	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR		Date	

☐ CHECK HERE IF MAKING CHANGES

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7/10/16

Friday, August 15, 2003

**Division of Corporation
Uniform Business Report Filings**

**From: MORTGAGE LENDER'S GROUP INC
P02000039484**

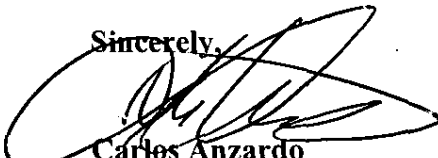
Through this I want to notify that the papers for Uniform Business report never been send to me.

I went to an Accounting Office and they let me Know the amount to be pay for the company and also the reports.

I apology for the inconvenient then here I am sending my payments for the year of 2003.

Any question contact me (305) 828-1790

Sincerely,



Carlos Anzardo
President



Luis R. Blanco
Commission # DD125150
Expires July 13, 2006
Bonded Thru
Atlantic Bonding Co., Inc.

