## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

| DOCUMENT # P02000086725  1. Entity Name  FIRST UNITED MORTGAGE SERVICES CORP   |  |  |   | :              | <b>03 NOV</b> 20   | PM 1:45                              |
|--|--|--|---|----------------|--|--------------------------------------|
| FIRST UNITED MORTGAGE SERVICES CORP  |  |  |   |                | SACRAT. 9  | Y OF STATE                           |
| DO NOT WRITE IN THIS SPACE   |  |  |   | A-73           | TALLAHASS  | Y OF STATE<br>SEE FLORIDA            |
| em fac   |  |  |   |                |  |                                      |
|  | Place of Business  Commercial Bl   | 3. Mailing Address                                 |   | D              | EINSTATIME   | NT 03                                |
| Suite, Apt.  | #, etc.  | Suite, Apt. #, etc.                                | ···   | n              | DO NOT WRITE IN THIS   | S SPACE                              |
| Suite 134 City & State City & State  |  |  |   | 4.1            | FEI Number   | Applied For                          |
| 1 '  | t. Lauderdale, FL  |  |   |                | -2071596   | Not Applicable                       |
| 33309  | Country  | Zip  | Country   | 5. (           | Certificate of Status Desired  | \$8.75 Additional<br>Fee Required    |
| 33303  | DO NOT WRITE IN  | THIS SPACE   |   |                | ne and Address of Current Registe  |                                      |
| <u> </u>   |  |  | -Name<br>Dice   | mbrine         | o, Antonio   |                                      |
|  |  |  |   | dress (P.O.    | Box Number is Not Acceptable)  |                                      |
|  |  |  | 3002  |                | Jen Manor  |                                      |
|  |  |  | City  | <del> </del>   |  | Zip Code                             |
|  |  |  | Plan Plan   | <u>tatior</u>  |  |                                      |
| 8. The above and accept  | named entity submits this state<br>t the obligations of registered ag  | ement for the purpose of chan<br>gent.             | ging its registered offi  | ce or registe  | red agent, or both, in the State of Flo  | orida. I am familiar with,           |
|  |  |  |   |                |  |                                      |
| SIGNATURE  | $^{\prime}$ // $\sim$  | $\sim$   | <u>Antonio I</u>  | )icemb         | rino   | 11/18/03                             |
|  | Signature wheel or printed name of r   | registered agent and title if applica              | able. (NOTE: Regist   | ered Agent sig | nature required when reinstating)  | DATE                                 |
| Jar  | Signature Typed or printed name of r<br>nuary 1 - May 1 Fee Is \$150.00<br>After May 1, Fee Is \$550.00<br>Amended UBR Is \$61.25  |  | able. (NOTE: Regist   | ered Agent sig | nature required when reinstating)  9. Election Campaign Financing Trust Fund Contribution. |                                      |
| Jar<br>Make Check  | nuary 1 - May 1 Fee Is \$150.00<br>After May 1, Fee Is \$550.00<br>Amended UBR Is \$61.25<br>Payable to Florida Departmen  | t of State   | able. (NOTE: Regisi   | ered Agent sig | nature required when reinstating)  9. Election Campaign Financing                          | \$5.00 May Be Added to Fees          |
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| Jar<br>Make Check<br>10.<br>TITLE<br>NAME  | nuary 1 - May 1 Fee Is \$150.00 After May 1, Fee Is \$550.00 Amended UBR Is \$61.25 Payable to Florida Departmen OFFICERS AN President Dicembrino, A   | nt of State ND DIRECTORS ntonio                    | (NOTE: Regist   | ered Agent sig | nature required when reinstating)  9. Election Campaign Financing                          | \$5.00 May Be                        |
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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:

STF FL32381F.1

Antonia Dicembrino
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/18/03 954-717-8716

Date Daytime Phone #

\_\_\_\_

## LASHBROOK & WOLLARD, P.A. CERTIFIED PUBLIC ACCOUNTANTS

Dru D. Lashbrook, CPA Brian H. Wollard, CPA David J. Fasano, CPA, MBA Dean R. Lashbrook Jerry W. Reed, EA Member of the Florida Institute of Certified Public Accountants 4481 Stirling Road Fort Lauderdale, Florida 33314 Telephone: (954) 581-8112 Fax: (954) 581-2554 info@lbrook.com

November 18, 2003

Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32302-1500

RE: First United Mortgage Services Corp. Document # P02000086725

To Whom It May Concern:

We are the Certified Public Accountants for the above referenced corporation. It recently came to our attention that our client did not receive their original 2003 UBR Report and that it is probably due to the fact that their mailing address was changed in 2002, and the Department of State still shows the old address.

We ask that you please change the address of the corporation in your records to: 3201 W Commercial Blvd., Ft. Lauderdale, FL 33309.

We contacted the State and they informed us to mail the UBR Report with \$150.00 immediately. Enclosed please find the report and check for \$150.00 as requested. If you should have any questions, please contact our office. Thank you.

TO SEE THE PROPERTY OF THE SECTION O

Sincerely,

LASHBROOK & WOLLARD, P.A.

Brian H. Wollard, CPA

for the firm.

BHW/sm Enclosures