## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000095473

**FILED** Mar 28, 2008 Secretary of State

Entity Name: UNITED STATES INVESTMENTS & MORTGAGE CORPORATION

**Current Principal Place of Business: New Principal Place of Business:** 

1401 CLYESDALE DRIVE 1401 CLYDESDALE DRIVE LOXAHATCHEE, FL 33470 LOXAHATCHEE, FL 33470

**Current Mailing Address: New Mailing Address:** 

1401 CLYESDALE DRIVE P. O. BOX 1400

LOXAHATCHEE, FL 33470 LOXAHATCHEE, FL 33470

FEI Number: 20-5273816 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PRIMOFF, EDWARD PRIMOFF, EDWARD 1401 CLYESDALE DRIVE 1401 CLYDESDALE DRIVE LOXAHATCHEE, FL 33470 US US LOXAHATCHEE, FL 33470

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.

SIGNATURE: 03/28/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Address:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition PRIMOFF, EDWARD PRIMOFF, EDWARD Name: Name:

1401 CLYESDALE DRIVE 1401 CLYDESDALE DRIVE Address: City-St-Zip: LOXAHATCHEE, FL 33470 City-St-Zip: LOXAHATCHEE, FL 33470

Title: () Delete Title: (X) Change ( ) Addition

PRIMOFF, SUZANNE PRIMOFF, SUZANNE Name: Name: 1401 CLYESDALE DRIVE Address: 1401 CLYDESDALE DRIVE Address: LOXAHATCHEE, FL 33470 LOXAHATCHEE, FL 33470 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SUZANNE PRIMOFF ST 03/28/2008