

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 16 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P93000001954 (5)

1. Corporation Name:

PARAMOUNT MORTGAGE INC.

Principal Place of Business

1550 MADRUGA AVE.  
SUITE 331  
CORAL GABLES FL 33146  
US

Mailing Address

1550 MADRUGA AVE.  
SUITE 331  
CORAL GABLES FL 33146-3039  
US

3. Date incorporated or Qualified  
01/11/1993

3a. Date of Last Report  
03/29/1996

2. Principal Place of Business

21 12790 South Dixie Hwy  
Suite, Apt. #, etc.  
22 #100

23 Miami Fla  
City & State

24 33156 Dade  
Zip Country

2a. Mailing Address

27 12790 South Dixie Hwy  
Suite, Apt. #, etc.  
28 #100

29 Miami Fla  
City & State

30 33156 Dade  
Zip Country

4. FEI Number  
65-0379430

Applied For  
☒ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PALMER, PAUL  
1550 MADRUGA AVE.  
STE 240  
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81 Name Palmer, Paul  
82 Street Address (P.O. Box Number is Not Acceptable) 12790 South Dixie Hwy #200  
83  
84 City Miami FL 85 Zip Code 33156

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

DAVID JOHNSON 1-8-97

(Signature, typed or printed name of registered agent and city, if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	1. DELETE
NAME	JOHNSON, DAVID
STREET ADDRESS	1550 MADRUGA AVE #331
CITY - ST - ZIP	CORAL GABLES FL
TITLE	1. DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	1. DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	1. DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	1. DELETE
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1. Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
1.2 NAME	JOHNSON, DAVID
1.3 STREET ADDRESS	12790 South Dixie Hwy
1.4 CITY - ST - ZIP	Miami FL 33156
2.1 TITLE	1. Change <input type="checkbox"/> Addition <input type="checkbox"/>
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	1. Change <input type="checkbox"/> Addition <input type="checkbox"/>
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	1. Change <input type="checkbox"/> Addition <input type="checkbox"/>
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	1. Change <input type="checkbox"/> Addition <input type="checkbox"/>
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	1. Change <input type="checkbox"/> Addition <input type="checkbox"/>
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual 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, the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

DAVID JOHNSON 1-8-97 305-259-7510

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0204009

CR2E034 (9/96)