SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Jul 25 1997 8:00am

FILED

	1997	Secretary DIVISION OF CO		Secretar	y of State
1. Corporation	MENT # P9300 RST MORTGAGE BROKER	0003389 (2) AGE CORPORATION		A MARIJORNI NIKA ARIJAN ARIJI ARIJI ARIJI AR	NI BONA BRIBR NIBR HABI IRNIR IRNI IBRE
			4.300		
Principal Place		Mailing Address		110011001110011111111111111111111111111	erf #8144 #814# eri## tilbt ##118 #41 48#1
1452 E. MICHIGAN STREET ORLANDO FL 32806		1452 E. MICHIGAN STREET ORLANDO FL 32806			
US		US			IN THIS SPACE
				3. Date Incorporated or Qualified	3a. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address		01/14/1993 4. FEI Number	07/03/1996 Applied For
21 2987	MONACO COURT		MED COURT	59-3158975	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & State		City & State			Fee Required
	NDO FL.		7. 32806	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zig.	Country	20 3280b 3	Country	8. This corporation owes or has pa	
24 328			o USA	Personal Property Tax due June	
100	9, Name and Address of Curre	nt Hegistered Agent	81 Names	10. Name and Address of New Re	gistered Agent
INTRICL, DESIREE IN				obert G. Israe	
SUITE 210				ress (P.O. Box Number is Not Acceptate	ole)
	ITER PARK FL 32789		83		
l			84 City		B5 Zip Code
dd Dismission	to the grantings of Continue COT OF	20 and 607 1600 Florida Plat 4-	URL	ANDO	FL 32806
office or r	egistered agent, or both, in the State	of Florida, Such change was au	thorized by the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	ot the appointment as registered
l /	V/////// /////	gations of, Section 607.0505, Flori	da Statutes.		
SIGNATURE	Signature, typed or printed name of cygistered ag		Registered Agent signature requ		DATE
12.	OFFICERS AN	ID DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE NAME	ISRAEL, ROBERT G	□ ptreit	1.1 TITLE 1.2 NAME		Change Addition
STREET ADDRESS	2937 MONACO CT		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32806		1.4 CITY-ST-ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	ISRAEL, DESIREE K		2.2 NAME		
STREET ADDRESS	2937 MONACO CT		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	ORLANDO FL 32808	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition
NAME			3.1 MILE		C Sumile C Madition
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	41 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	•	
CITY-ST-ZIP			64 CITY-ST-ZIP	d in Section 119.07(3)(i). Florida Statute	

recommends certify that the information supplied with this bling 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 eath; 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 12 or Block 13 if changed, or on an attachment with an address.

721.97 (407)839.0062