## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

Principal Place of Business

1841 NW 33 ST.

| 1. Corporation Name | P930000097 16 (U) |
|---------------------|-------------------|
| SAFETY MORTGAGE     | FINANCIAL, INC.   |
|                     |                   |

Mailing Address

P.O. BOX 6045

| FORT LAUDER<br>US             | RDALE FL 33309   | FT LAUDERDALE FL 30  | 3310                |                         |   |  |                                       |
|-------------------------------|--|--|---------------------|-------------------------|---|--|---------------------------------------|
| US                            |  |  |                     |                         | <ol> <li>Date Incorporated or Qualified<br/>02/01/1993</li> </ol>                         | 3a. Date of Last 07/07/1               | •                                     |
| 2. Principal Pia              | The second secon | 2a. Mailing Address  |                     |                         | 4. FEI Number   |  | Applied For                           |
| 1 184                         | 1 NW 3355  | 26 1841 NW 33 55<br>Suite, Apt. #, etc.  |                     |                         | 65-0385959  |  | Not Applicable                        |
| Suite, Apt. #                 | #, etc.  | Suite, Apt. #, etc.  |                     |                         | 5. Certificate of Status Desired  |  | 75 Additional<br>e Required           |
| City & State                  | Louderdile F   | City & State   | ledo                | le FL                   | Election Campaign Financing     Trust Fund Contribution                                   | 1 1                                    | .00 May Be<br>ded to Fees             |
| Ziju                          | Country  | Zip  | Co                  | untry                   | 8. This corporation has liability for i   | ntangible tax under                    | s 199.032,                            |
| 4 333                         | 09 25 1)5A-  | 29 33309   | 30                  | USA                     |   | D/No                                   |                                       |
|                               | 9. Name and Address of Curren  | t Registered Agent   |                     | 1                       | 10. Name and Address of New R   | egistered Agent                        |                                       |
|                               |  |  |                     | 81 Name                 |   |  |                                       |
|                               | RNEST J JR.  |  |                     | 82 Street Ad            | dress (P.O. Box Number is Not Acceptab  | e)                                     |                                       |
| 1970 NW                       |  |  |                     | L                       |   |  |                                       |
| FT LAUD                       | ERDALE FL 33309  |  |                     | 83                      |   |  |                                       |
|                               |  |  |                     | 84 City                 |   | FI 85                                  | Zip Code                              |
| 11. Pursuant to               | o the provisions of Sections 607,0502  | and 607.1508, Florida Statut   | es, the ab          | ove-named corp          | oration submits this statement for the pur<br>pard of directors. I hereby accept the appo | pose of changing it                    | s registered office                   |
| or registere<br>familiar with | ed agent, or both, in the State of Floric<br>h, and and put the objections of, Secti   | la. Such change was authoriz<br>on 607.0505, Florida Statutes  | ed by the           | corporation's bo        | pard of directors. I hereby accept the appo   | pintment as register                   | red agent. I am                       |
| SIGNATURE                     | Control of the state of the sta | 1 Free-CT  | 1/41                | 4                       |   | 1-75-6                                 |                                       |
|                               | Sand State of Billing & State of State of State of   | in tirre if applicable (NC   | TE. Ragistere       | d Agent signature requi |   | DATE                                   | <b>8</b>                              |
| 12.                           | OF ICERS AND   | DIRECTORS  | 13.                 |                         | ADDITIONS/CHANGES TO OFFI   |  |                                       |
| TITUF .                       | U  | □ DELETE   | 1.1                 |                         |   | ☐ Chang                                | je 🔲 Addition                         |
| NAME                          | KARA, ERNEST J JR.   |  | 1.2                 | IAME                    |   |  |                                       |
| STREET ADDRESS                | 1970 NW 33 CT  |  | 1.3 9               | TREET ADDRESS           |   |  |                                       |
| CHTY - ST - ZIF               | FT LAUDERDALE FL 33309   |  | 1.4 0               | ITY-ST-ZIP              |   | ·····                                  |                                       |
| TITLE                         | D  | ☐ DELETE   | 2.1                 | TITLE                   |   | Chang                                  | e 🔲 Addition                          |
| NAME                          | KARA, ERNEST J   |  | 221                 | IAME                    |   |  |                                       |
| STREET ADDRESS                | 1841 NW 33 ST  |  | 235                 | TREET ADDRESS           |   |  |                                       |
| CIPY-ST-ZIP                   | FT. LAUDERDALE FL  | <u>.</u>   | 240                 | HTY-ST-ZIP              |   |  |                                       |
| Tif,f                         |  | DELETE   | 3 1                 | THTLE                   |   | Chang                                  | e 🔲 Addition                          |
| NAME                          |  |  | 321                 | IAME                    |   |  |                                       |
| STREET ADDRESS                |  |  | 33                  | STREET ADDRESS          |   |  |                                       |
| CITY-ST-ZIP                   |  |  | 340                 | ITY - ST - ZIP          |   |  |                                       |
| Trice                         |  | ☐ DELETE   | 4.1                 | TITLE                   |   | ☐ Chang                                | ge 🔲 Addition                         |
| NAME                          |  |  | 421                 | IAME                    |   |  |                                       |
| STREET ADDRESS                |  |  | 435                 | TREET ADDRESS           |   |  |                                       |
| CULY: S1 - ZIF                |  | The second secon | 440                 | ITY-ST-7IP              |   | ······································ | · · · · · · · · · · · · · · · · · · · |
| TILE                          |  | DELETE   | 5.1                 | TITLE                   |   | Chang                                  | e 🔲 Addition                          |
| NAME:                         |  |  | 521                 | IAME                    |   |  |                                       |
| 1                             | Ì  |  | 539                 | TREET ADDRESS           |   |  |                                       |
| STREET ADDRESS                |  |  |                     | l l                     |   |  |                                       |
| STREET ADDRESS<br>COLY-S1-ZIE |  |  |                     | ITY-ST-ZIP              |   |  |                                       |
| j                             |  | ☐ DELETE   |                     |                         |   | ☐ Chang                                | pe Addition                           |
| C(1) - S1 - 2(E)              |  | DELETE   | 540                 | TITLE                   |   | ☐ Chanç                                | pe Addition                           |
| CHY-S1-7H:<br>THLE            |  | DELETE   | 54 (<br>6 1<br>62 t | TITLE                   |   | ☐ Chang                                | pe Addition                           |

roo nereby certify that the information supplied with this thing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 exploration or the redesign 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 in an address.

**SIGNATURE:**