

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000045507 (9)

1. Corporation Name

PETRO MORTGAGES, INC.



Principal Place of Business

Mailing Address

801 BRICKELL AVE
SUITE 1401
MIAMI FL 33131-2900

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SUITE 1401
MIAMI FL 33131-2900

2. Principal Place of Business

21 250 CATALONIA AVE

22 SUITE 303

23 CORAL GABLES, FL

24 39134 ZIP 33134

9. Name and Address of Current Registered Agent

VELEZ, ARNALDO
801 BRICKELL AVE
SUITE 1401
MIAMI FL 33131-2900

2a. Mailing Address

26 P.O. Box 140536

27 State, Apt., etc.

28 City & State

29 CORAL GABLES, FL

30 33134 ZIP

3. Date Incorporated or Qualified

06/23/1993

3a. Date of Last Report

04/21/1995

4. FEI Number

65-0427130

Applied For
Not Applicable

5. Certificate of Status Declared

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible taxes under s. 193.032,
Florida Statutes. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

GARY R. MARLIN

82 Street Address (P.O. Box Number is Not Acceptable)

250 CATALONIA AVE SUITE 303

83

84 City

CORAL GABLES

FL

85 Zip Code

33134

11. Pursuant to the provisions of Sections 607.0602 and 607.1503, 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 a registered agent. I am familiar with, and accept the obligations of, Section 607.0603, Florida Statutes.

SIGNATURE

GARY R. MARLIN

12. OFFICERS AND DIRECTORS

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

14. I declare by certifying that the information appearing with this form is true, correct, and does not qualify for the exemption stated in Section 119.07(4)(b), Florida Statutes. I further certify that the information indicated on the financial 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 or a registered or bonded employee of the corporation, this report is prepared by Chapter 607, Florida Statutes, and that my name appears on Block 12 or Block 13 if changed from a previous report with an address.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/96

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