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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Moriham
Scoretary of State
DIVISION OF CORPORATIONS

1996
DOCUMENT #
1. Corporation Name

P93000063171 (1)

PROFESSIONAL MORTGAGE CORP.

Principal Place of Business Mailing Address				-	
10651 N. K SUITE 120 MIAMI FL 3 US	ENDALL DRIVE 83176	10651 N. KENDALL Suite 120 Miami Fl 33176 US	DRIVE	Date Incorporated or Qualfied 3a. Date of La	
		. ,			/1995
		2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt. F, etc.		· +		65-0435033 Not Applicable	
22]	r, etc.	Suite, Apt. #, etc.			.75 Additional ee Required
City & State	City & State				5.00 May Be
210	Country		Country:	This corporation has liability for intangible tax under	dded to Fees
24	25	29	30	Florida Statutes Yes No	₹ 5 193.00Z,
	9. Name and Address of Curre	L		10. Name and Address of New Registered Agent	
			81 Name		
GONZA	ALEZ, JORGE M		82 Street	dress (P.O. Box Number is Not Acceptable)	
	SW 152 CT		83		
UNIT H					
MAMI	FL 33185		84 City	FL 85	Zip Code
11. Pursuant t	to the provisions of Sections 607,050	2 and 607.1508, Florida Stati	ites, the above named co	progration submits this statement for the purpose of changing	its registered office
or register familiar wi	red agent, or both in the State of Flor ith, and accept the o bligations of Sec	ida. Such change was author 150 S OZ 0505, Hodda Statute	ized by the corporation's	board of directors. Thereby accept the appointment as registe	ered agent. I am
SIGNATURE	Homesu	1	,,,	2/4/9/	
SIGNATURE .	Signar A Marchandra and the same of the same	र सार्वा चन्ना को को जा का किस्ता है। इस को चन्ना की को को को की	#FE to Jistored Agent suggest as a	cipared when reliestating WATE	
12.	OFF LYRS AN	ID DIFECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
Thi	D	☐ DELF!E	1 1 Tillef	☐ Chai	nge 🔲 Addition
N4M:	GONZALEZ, JORGE M		1.2 NAME		
\$1461.40 @055	4822 SW 152 CT UNIT H		1.3 STEEFT ACORESS		
C(t) - S1 - 7(P)	MIAMI FL 33185		1.4 CHY - ST - ZIP		
Talle		☐ DELETE	2 1 BI\F	☐ Char	ige 🔲 Addition
NAME:			2.2 NAME		
STREET ADDRESS			2.3 STHEET ADDRESS		
City-St-ZiP			2.4 Ci1+-S1 ZiP		
THELF	1	☐ DEFEIE	3 1 HILE	Char	nge 🔲 Addition
NAME	ļ		3.2 NAME		
STREET ADDRESS	1		3.3 STRELT ADDRESS		
1015 - ST - ZIF 101_F		DELETÉ	3.4 CITY - ST - ZIP		a:
NAME			4 1 TI*LE	☐ Char	nge 🔲 Addition
STEEL ACORUS			4.2 NAME		
			4.3 STREET ADDRESS		
TOTAL STEAM	•••	DELETE	4.4.0 (TY - ST - Z-F) 5. 1.10 (LE	Chai	nge 🗍 Addition
NAME			5.2 NAME	L.J Cola	Ac T Haddiell
STEEL ALGIBESS			5.3 STREET ADDRESS		
Cife \$1.70			5.4 CHY+ST Ziff		
100 E	†	DELETE	6 1 Title	Char	nge Addition
NAME		£_3 ·	6.2 NAME		a
SHEET ATORESS			€ 3 STREET ADDRESS		
City - \$1 - 7 P			€ 4 Cify - ST - 7iP		
14. Ldo hereb	y cert-fy that the information supplied	with this filing is voluntarily for	mished and does not qua	t Hify for the exemption stated in Section 119.07(3)(k), Florida St	atutes. I further
certily that oath, that	t the information indicated on this ann	iual report or supplemental ar bration or the receiver or trust	inual report is true and ac see empowered to execut	corrate and that my signature shall have the same legal effect te this report as required by Chapter 607, Florida Statutes; and	as if made under

SIGNATURE:

NATURE AND THEFT IN PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

96 301-273-1244 Days a Prince

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CR2F034 (12/9