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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 13 1997 8:00am

Secretary of State

2/8/02 /200)212-9593

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400003204 (2)

AMERICAN MESA MORTGAGE GROUP, INC.

Principal Place 12902 SW 133 SUITE-C MIAMI FL 3317	COURT	Mailing Address P.O. BOX 522876 MIAMI FL 33152-2876 US								
US						3. Date Incorporated or Qualified 01/06/1994	3a. Dat 02/0	te of Last Re)8/1996	eport	
2. Principal P	lace of Business	2a. Mailing Address 26				4. FEI Number 65-0462033	Applied For Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Regulred		
City & State	e	City & State				6. Election Campaign Financing		\$5.00	<u>'</u>	
23		28				Trust Fund Contribution		Added t		
Ζιp	Country	Zip	Cou	ntry		8. This corporation has liability for			199.032,	
24	25	29	30			Florida Statutes 10. Name and Address of New Re	Yes [
UAD	9. Name and Address of Curre	nt Registered Agent		81 Na	ame	10. Name and Address of New Ne	gistered A	Maur		
	er, elyse l) Sw 13th St									
	MI FL 33144			82 St	eet Addre	ess (P.O. Box Number is Not Acceptat	ote)			
***************************************	***************************************			83				,		
			ŀ	B4 Ci	ly		FL	85 Zip (Code	
office or r	egistered agent, or both, in the State in familiar with, and accept the oblig Standure, typed or punted name of registered ag	e of Florida. Such change wa gations of, Section 607.0505.	as authorized Florida Stat	d by the ules.	corporation	oration submits this statement for the pon's board of directors. I hereby accepted when renstating)	pt the appo	ointment as	registered	
12.		ID DIRECTORS	13.	, Agent alg	nature require	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	IS IN 12	
TITLE	D	DELETE	13 10	ILE			<u>:</u>	Change	Addition	
NAME	FREEDMAN, HOWARD		1.2 NA	ME						
STREET ADDRESS	8030 SW 13TH ST		1.3 ST	REET ADDR	IESS					
CITY-ST-ZIP	MIAMI FL 33144			TY-ST-ZIF						
TITLE		L_ DELETE	2.1 TJ					Change	Addition	
NAME			2.2 NA							
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CITY+ST-ZIP TITLE		DELETE	3.1 TII		·			Change	☐ Addition	
NAME			3.2 NA			~ *		_ •		
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NAME			4. 2 N							
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NAME			5.2 NA		SECO					
STREET ADDRESS			1	REET ADDI	- 1					
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NAME			6.2 NA					0.migo		
STREET ADDRESS				REET ADDI	RESS					
SINECI MUUNCSS			0.5 51							

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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name