PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT F STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT#

P94000027035

SIMPLIFIED MORTGAGES AND INSURANCE AGENCY, INC.

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|--|--|---|---|---|---|---|
| Principal Prace of Business Mailing Address | | | | | | |
| 2711 W SUNR FT LAUDERDA | ISE BLVD SUITE 4 ILE FL 33311 | 2711 W SUNRISE BLVD FT LAUDERDALE FL 333 | | | DO NOT WRIT | TE IN THIS SPACE |
| | | | | | 3. Date Incorporated or Qualified | THE WAY THE STATE OF THE STATE |
| | | | | | 04/06/1994 | |
| 2. Principal Pl | ace of Business | 2a. Mailing Address | | | 4. FEI Number | Applied For |
| 21 | | 26 | | | 65-0488253 | Not Applicat |
| Suite Apt : | #, etc | Suite Apt. #, etc. | | | | \$8.75 Additional |
| 22 | | 27 | | | 5. Certificate of Status Desired | Fee Required |
| City & State | | City & State | | | 6. Election Campaign Financing | \$5.00 May Be Added to Fees |
| 23) - Zip | Country | 28 Zip | Country | | Trust Fund Contribution | |
| 24 | 25 | 29 | 30 | | This corporation owes the current Intangible Personal Property. | ent year Yes No |
| | 9. Name and Address of Curr | | 1201 | | 10. Name and Address of New R | |
| | | | 81 | Name | | |
| ROI | BINSON, DANIEL E | | 82 | | | |
| 271 | 2711 W SUNRISE BLVD SUITE 4 | | | Street Add | dress (P.O. Box Number is Not Acceptable) | |
| FT (| LAUDERDALE FL 33311 | | 83 | | -10/05/9901084016 | |
| | | | | | | 57.00 CCO_OO |
| | | | 84 | City | 一种种种 | 550-00***550-00 |
| | | | | | | · [] |
| 11 Pure lant | to the possisions of sections 607.05 | 502 and 607 1608 Florida Statute | as the above | named come | | |
| 11. Pursuant office or ragent La | to the provisions of sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obl | 502 and 607.1508, Florida Statute ite of Florida. Such change was igations of, section 607.0505, Fl | es, the above authorized by orida Statutes | named corporat the corporat s. | oration submits this statement for the pution's board of directors. I hereby accep | rpose of changing its registered it the appointment as registered |
| SIGNATURE _ | | | | | | |
| SIGNATURE, | Still after typed or printed name of registered a | gent and title if applicable (N | OTE: Registered A | | qured when reinstaling) | DATE |
| SIGNATURE . | Stijl after it speed or printed name of registered a | gent and tibe if application (N AND DIRECTORS | OTE: Registered A | | qured when reinstaling) | DATE FICERS AND DIRECTORS IN 12 |
| SIGNATURE . 12. 11 LE | Signature is and or printed name of registered at OFFICERS A | gent and title if applicable (N | OTE: Registered A 13. 1.1 TITLE | | qured when reinstaling) | DATE |
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Theretry cerry mat trie information supplied with this filing does not quality for the exemption stated in section 119.07(3)(i), Florida Statules. 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 appears in Block 12 or Block 13 if ctyriged, or on an attachment with an address.

GNATURE:

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