

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 20, 2003 8:00 am**  
**Secretary of State**

05-20-2003 90069 040 \*\*\*150.00

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**DOCUMENT # P94000039666**

**1. Entity Name**  
**MULTI-CREDIT MORTGAGE CORP.**



**Principal Place of Business**  
**299 ALHAMBRA CIRCLE**  
**SUITE #321**  
**CORAL GABLES FL 33134**  
**US**

**Mailing Address**  
**299 ALHAMBRA CIRCLE**  
**STE 321**  
**MIAMI FL 33134**  
**US**

**2. Principal Place of Business**  
**NONE**

**3. Mailing Address**  
**910624 S.W. 79 PL**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**MIAMI**

Zip

Country

Zip

Country

**33156**

**MIAMI - DADE**

**4. FEI Number** **65-0493108**

Applied For

Not Applicable

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

☒ **CHECK HERE IF MAKING CHANGES**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**NOYA, MARIANELA O**  
**299 ALHAMBRA CIRCLE**  
**SUITE #321**  
**CORAL GABLES FL 33134**

**Name**  
**NOYA, MARIANELA O.**  
**Street Address (P.O. Box Number is Not Acceptable)**  
**10624 S.W. 79 PL**  
**City** **MIAMI** **FL** **Zip Code** **33156**

**8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE** **MARIANELA O. NOYA** **01/30/2003**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing** **\$5.00 May Be Added to Fees**  
**Trust Fund Contribution.** ☐

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

<b>TITLE</b>	<b>D</b>	<input type="checkbox"/> Delete
<b>NAME</b>	<b>NOYA, MARIANELA O</b>	
<b>STREET ADDRESS</b>	<b>299 ALAHAMBRA CIRCLE, #321</b>	
<b>CITY-ST-ZIP</b>	<b>CORAL GABLES FL</b>	
<b>TITLE</b>		<input type="checkbox"/> Delete
<b>NAME</b>		
<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> Delete
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<b>CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> Delete
<b>NAME</b>		
<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>		

<b>TITLE</b>	<b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>	<b>MARIANELA O. NOYA</b>	
<b>STREET ADDRESS</b>	<b>10624 S.W. 79 PL</b>	
<b>CITY-ST-ZIP</b>	<b>MIAMI, FL 33156</b>	
<b>TITLE</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		
<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		
<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>NAME</b>		
<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>		

**12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.**

**SIGNATURE:**

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**01/30/2003 (305) 279-1716**

Date

Daytime Phone #

CR2E034 (10/02)

Attachment 90136857  
P94000039666

WRITTEN ACTION IN LIEU OF JOINT ANNUAL  
MEETING OF SOLE DIRECTOR AND SOLE SHAREHOLDER OF  
MULTICREDIT MORTGAGE CORP.

The undersigned, being the Sole Director and Sole Shareholder of MULTI-CREDIT MORTGAGE CORP., a Florida corporation, hereby takes the following written actions in lieu of holding a meeting regarding same, all pursuant to the terms of Florida Statutes Section 607.0704 and 607.0821:

Corporate Actions. Upon review of the results of the business of the Corporation during the current fiscal year, the Corporation hereby ratifies, approves and confirms all actions taken by the Officers and Directors of the Corporation in the current fiscal year.

Election of Directors. Pursuant to the Corporation's By-Laws and Articles of Incorporation, the following person is elected as the Sole Director of the Corporation to serve until the end of the next fiscal year and/or until his/her successor is duly elected, qualified and takes office:

MARIANELA O. NOYA


Election of Officers. The following person is elected as the following officers of the Corporation, to serve until the end of the next fiscal year and/or until his/her successor is duly elected, qualified and takes office pursuant to the By-Laws of the Corporation:

MARIANELA O. NOYA  
President, Secretary and Treasurer

Books and Records. Pursuant to the provisions of the Florida Statutes Section 607.1620 and 607.1621, the Shareholder of the Corporation waives the requirement that a balance sheet and profit and loss statement for the current fiscal year be prepared within four months after the close of the current fiscal year.

Registered Agent and Registered Office. The Registered Agent and the Registered Office of the Corporation shall be Marianela O. Noya, at such address as Ms. Noya shall maintain her office.

Dated: 01/30/2003

  
MARIANELA O. NOYA  
SOLE OFFICER, DIRECTOR AND  
SHAREHOLDER