SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000048011 (8)

THE MORTGAGE PROCESS, INC.

Principal Place of Business 2301 W. SAMPLE ROAD BLDG. 5. SUITE BC POMPANO BEACH FL 33073

Mailing Address

2301 W. SAMPLE ROAD BLDG. 5. SUITE BC

FILED Jul 30 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE POMPANO BEACH FL 33073 3. Date Incorporated or Qualified 06/23/1994 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0465981 Not Applicable 21 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees **Trust Fund Contribution** 23 28 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Country Zip Zip 24 29 30 Personal Property Tax due June 30. 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BROOK, LINDA J SROOK **502 MARILL TERRACE** Box Number is Not Acceptable) 82 N. LAUDERDALE FL 33068 83 84 11. Pursuant to the provisions of sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered rendering the provisions of sections of 1992 and of 19 SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. LINDA I BROOK 2301 W SAM PLE RD, BLDG 5 STE 8C Change Addition 1,1 TITLE TITLE DELETE BROOK, LINDA J 1.2 NAME NAME 1369 SO. ST. RD. 7 1.3 STREET ADDRESS STREET ADDRESS DOMAZNO BEACH FL 33073 NORTH LAUDERDALE FL 1.4 CITY-ST-ZIP CITY-ST-ZIP 2.5 TITLE Change Addition TITLE DELETE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change 3.1 TITLE Addition TITLE DELETE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP 4.1 TITLE Change Addition TITLE DELETE 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE Change Addition DELETE 5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE ___ Addition TITLE DELETE L Change 6.2 NAME

CITY-ST-ZIP 14. 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 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 changed, or on an attachment with an address.

NAME

STREET ADDRESS

6.3 STREET ADDRESS

1/22/98

954-969-5090

CR2E034 (5/98)