

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000053177 (9)

1. Corporation Name

FORUM MORTGAGE CORPORATION, INC.



Principal Place of Business

Mailing Address

1839 SW 27TH AVE
MIAMI FL 33145

1839 SW 27TH AVE
MIAMI FL 33145

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

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3. Date Incorporated or Qualified

07/19/1994

3a. Date of Last Report

06/16/1995

4. FEI Number

65-0505457

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HERNANDEZ, HOSEY ESO
2701 S BAYSHORE DR SUITE 602
MIAMI FL 33133

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed below of registered agent and the filer, if applicable.

(NOTE: Registered Agent signature required when term is changed.)

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME FONTE, AUGUSTO
STREET ADDRESS 1839 SW 27TH AVE
CITY-ST-ZIP MIAMI FL 33145

TITLE DV
NAME MORENO, ALBERT
STREET ADDRESS 1839 SW 27TH AVE
CITY-ST-ZIP MIAMI FL 33145

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13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
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64 CITY-ST-ZIP

71 TITLE
72 NAME
73 STREET ADDRESS
74 CITY-ST-ZIP

81 TITLE
82 NAME
83 STREET ADDRESS
84 CITY-ST-ZIP

DV

DP

☒ Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

REGISTERED AGENT

6-18-96 (305) 860 0060

CR2E034 (3/96)