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Jan 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000010526 (8)

1. Corporation Name

ATLANTIC TRUST MORTGAGE CORPORATION

Principal Place of Business

6255 BIRD ROAD
SUITE 3I
MIAMI FL 33155
US

Mailing Address

6255 BIRD ROAD
SUITE 3I
MIAMI FL 33155
US

2. Principal Place of Business

21 6255 Bird RD
Suite, Apt. #, etc.

22 City & State

23 Miami, FL. 33155

24 Zip Country

33155

25 Date

ZULUETA, IGNACIO G
6262 BIRD RD.
SUITE 3I
MIAMI FL 33155

9. Name and Address of Current Registered Agent

ZULUETA, IGNACIO G
6262 BIRD RD.
SUITE 3I
MIAMI FL 33155

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 name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1/5/98
PAY

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME ZULUETA, IGNACIO G
STREET ADDRESS 6262 BIRD RD., STE. 3I
CITY-ST-ZIP MIAMI FL 33155

TITLE ☐ DELETE

D
NAME IZAGUIRRE, JORGE
STREET ADDRESS 6262 BIRD RD., STE. 3I
CITY-ST-ZIP MIAMI FL 33155

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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.

SIGNATURE

1/5/98 (205) 610-7-8311

CR2E034 (10/97)