

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 01 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000010850 (2)**

1. Corporation Name
C.P. MORTGAGE DEPOT, INC.

Principal Place of Business
**2459 SO. CONGRESS AVENUE STE. 204
WEST PALM BEACH FL 33406**

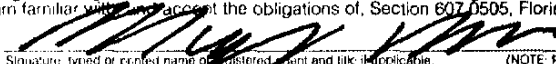
Mailing Address
**2459 SO. CONGRESS AVENUE STE. 204
WEST PALM BEACH FL 33406-7616**



2. Principal Place of Business 21 2845 N. Military Trail Suite, Apt. #, etc. 22 Suite 17 City & State 23 West Palm Beach, Fl Zip 24 33409		2a. Mailing Address 26 2845 N. Military Trail Suite, Apt. #, etc. 27 Suite 17 City & State 28 West Palm Beach, Fl Zip 29 33409		3. Date Incorporated or Qualified 02/06/1995		3a. Date of Last Report 03/08/1996	
				4. FEI Number NOT APPLICABLE		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			

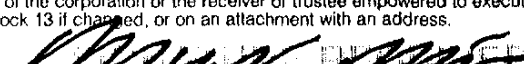
9. Name and Address of Current Registered Agent MINNS, MYLES R 2459 SO. CONGRESS AVENUE STE. 204 WEST PALM BEACH FL 33406				10. Name and Address of New Registered Agent			
				81 Name Minns, Myles R.			
				82 Street Address (P.O. Box Number is Not Acceptable) 2845 N. Military Trail			
				83 Suite 17			
				84 City West Palm Beach			
				85 FL		Zip Code 33409	

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:  DATE: **4-18-97**

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
☐ DELETE				☐ Change ☐ Addition			
1.1 TITLE D				1.1 TITLE D			
1.2 NAME MINNS, MYLES R				1.2 NAME Minns, Myles R.			
1.3 STREET ADDRESS 2459 SO. CONGRESS AVENUE STE. 204				1.3 STREET ADDRESS 2845 N. Military Trail Ste. 17			
1.4 CITY-ST-ZIP WEST PALM BEACH FL 33406				1.4 CITY-ST-ZIP West Palm Beach, Florida 33409			
☐ DELETE				☐ Change ☐ Addition			
2.1 TITLE				2.1 TITLE			
2.2 NAME				2.2 NAME			
2.3 STREET ADDRESS				2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP				2.4 CITY-ST-ZIP			
☐ DELETE				☐ Change ☐ Addition			
3.1 TITLE				3.1 TITLE			
3.2 NAME				3.2 NAME			
3.3 STREET ADDRESS				3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP				3.4 CITY-ST-ZIP			
☐ DELETE				☐ Change ☐ Addition			
4.1 TITLE				4.1 TITLE			
4.2 NAME				4.2 NAME			
4.3 STREET ADDRESS				4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP				4.4 CITY-ST-ZIP			
☐ DELETE				☐ Change ☐ Addition			
5.1 TITLE				5.1 TITLE			
5.2 NAME				5.2 NAME			
5.3 STREET ADDRESS				5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP				5.4 CITY-ST-ZIP			
☐ DELETE				☐ Change ☐ Addition			
6.1 TITLE				6.1 TITLE			
6.2 NAME				6.2 NAME			
6.3 STREET ADDRESS				6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I do 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:  DATE: **4-18-97**

CR2E034 (9/96)