

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 28, 2003 8:00 am**  
**Secretary of State**

01-13-2003 90421 045 \*\*\*150.00

0046392 AV

**DOCUMENT # P95000040592**

**1. Entity Name**  
**MUNICIPAL MORTGAGE CORP.**



**Principal Place of Business**  
**9100 SW 24 ST**  
**STE 5**  
**MIAMI FL 33165**  
**US**

**Mailing Address**  
**8500 W FLAGLER STREET**  
**SUITE 103-A**  
**MIAMI FL 33144**

**35052600**



**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**4. FEI Number** **65-0581930**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

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

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

**WAGNER, ANGEL R**  
**8500 W FLAGLER ST.**  
**SUITE 103-A**  
**MIAMI FL 33144**

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

**FL** Zip Code

**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** \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00-**  
**After September 10, 2003 Fee will be \$750.00**  
**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**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**  
**PSTD**  
**WAGNER, ANGEL R**  
**8500 W FLAGLER ST STE 103-A**  
**MIAMI FL 33144**

**TITLE** ☐ Change ☐ Addition  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ Addition  
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**CITY-ST-ZIP**

**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

**7/23/03** **305-226-4302**  
Date Daytime Phone #

CR2E034 (4/03)

Attachment #

35052600

**Municipal**

Mortgage Corp.

P95000840592

July 23, 2003

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

To Whom It May Concern:

As per my conversation with Kathy on July 23, 2003 I was advised that the annual report was not filled due to a missing signature. I have informed Kathy, that my mail is sometimes misplaced due to the similarities in companies in my immediate area, specifically Gold Star Title located at 8550 W. Flagler Street, Suite 103. Since their existence some of my correspondence has been delivered incorrectly and never forwarded a complaint has been filed with our local post office. Please accept the annual report enclosed as it has been signed and dated. Also please be advised that the fee has already been paid since January, 2003. Thanking you in advance for your prompt attention to this matter.

Sincerely,

Angel Wagner