SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000068912 (1)

COMMERCE MORTGAGE, CORP.

pg. 10f 2

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SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Place of Business Mailing Address 7270 NW 12 ST. 7270 NW 12 ST. #761 #761 MIAMI FL 33126 DO NOT WRITE IN THIS SPACE MIAMI FL 33126 3. Date Incorporated or Qualified 3a. Date of Last Report 09/13/1995 4. FEI Number 06/14/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0607082 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Yes Yes Personal Property Tax due June 30. □ No 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 61 Name SANCHEZ, JUSTIN 8215 N.W. 192 TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33015** 83 84 City Zip Code 85 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) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE ☐ Change ☐ Addition SANCHEZ, JUSTIN NAME 700002249947--2 1.2 NAME 8215 NW 192 TERR. -07/29/97--01020--001 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33015** ****165.00 CITY-ST-ZIP 1.4 CITY-ST-ZIP ****165**.**00 DELETE Change Addition TITLE 21 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY_ST-ZIP 3.4. CITY - \$1 - ZIP DELE1E TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change TATLE 5.1 TITLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP DELETE TITLE 6.1 MILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

CITY-ST-ZIP 6.4 CITY-ST-ZIP I do hereby certify that the information information indicated on this angual re es not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the I am an officer or director of the appears in Block 12 or Block with an address.

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COMMERCE MORTGAGE CORP.

7270 N.W. 12th Street, Suite 761 • Miami, FL 33126 • Telephone (305)593-1203 • Fax (305)592-3566

7/18/97

Florida Division of Corporation PO Box 6327 Tallahassee, Fl. 32314

Mr. Sandra B. Mortham;

Please note that we have just received a second notice from your corporation, this is the first request that we have received to date. I am sending you the notice and the check required.

Thanking you is advance,

Justin Sanche

President