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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000083101 (2)

FILED May 05 1997 8:00am Secretary of State

CAPITAL LENDING CORP. Principal Place of Business Mailing Address 24 NE 24TH AVENUE 2490 N FEDERAL HIGHWAY POMPANO BEACH FL 33062 POMPANO BEACH FL 33064-6812 US								
•		·			 Date Incorporated or Qualifie 10/26/1995 		ate of Last R /21/1996	teport
2. Principal F	lace of Business	2a, Mailing Address			4. FEI Number			oplied For
1		26 24 NE	24 F	IVE.	65-0627451		, No	ot Applicable
Suite, Apt 2	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	4		Additional equired
City & Stat	C	City & State PompaNo	BEA	CH FL	Election Campaign Financing Trust Fund Contribution	, 0		May Be to Fees
Zφ	Country	Zip	Coul	ntry	8. This corporation has liability	for intengible		
<u> </u>	25	29 33062	30	USA	Florida Statutes	Yes		
	g, Name and Address of Curr	rent Registered Agent			10. Name and Address of New	Registered	Agent	
GO	ldbuam, keith a			81 Name				
535	5 TOWN CENTAR ROAD)	82 Street Add	fress (P.O. Box Number is Not Accep	otable)		
	TE 801		ļ					
B00	CA RATON FL 33486			83				
			ŀ	84 City			85 Zip	Code
						FL	.	
11. Pursuant office or	to the provisions of Sections 607.0 registered agent, or both, in the Sta	0502 and 607.1508, Florida State ate of Florida. Such change was	ites, the at authorized	ove-named corpora	poration submits this statement for thation's board of directors. I hereby ac	e purpose o	of changing i pointment as	ts registered registered
	to the provisions of Sections 607.0 registered agent, or both, in the Stani familiar with, and accept the ob-			pove-named corporal by the corporal les. Agent signature requirements	poration submits this statement for the stion's board of directors. I hereby accurate when reinstating)	ne purpose occept the ap	of changing i pointment as	ts registered registered
GNATURE	Signature 19 to or printed name of registeral	agent and title if applicable (NC			·	DATE	D DIRECTOR	RS IN 12
SIGNATURE	Signature species planted have of registered OFFICERS A	agest and title il applicable (NC	TE: Registered	Agent signature requ	ared when reinstaling)	DATE		RS IN 12
SIGNATURE 1 2. III.E IAME	Signature species planted have of registered OFFICERS A PD GERARDI, VINCENT	agent and title if applicable (NC	13. 11 TIT	Agent signature requi	ared when reinstaling)	DATE	D DIRECTOR	RS IN 12
SIGNATURE 2. IILE IAME	OFFICERS A PD GERARDI, VINCENT 24 NE 24TH AVENUE	agent and title if applicable (NC	13. 11 TIT	Agent signature requ	ared when reinstaling)	DATE	D DIRECTOR	RS IN 12
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i. 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 inclination in the same legal effect as if made under oath; that I arri an officer or director of the corporation or the receiver or frustee 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 applicacing with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-91

954-784-0450