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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600005505 (8)

DADELAND MORTGAGE, INC.

FILED Feb 25 1997 8:00am Secretary of State



Principal Plac	DE OFBUSINESS	Mailing Address				*** #2*** 05*** 25*** 05*		*** **** ****
8960 S.W. 87 COURT #11 MIAMI FL 33176		8960 S.W. 87 COURT #11 MIAMI FL 33176-2284						
					3. Date Incorporated 01/18/1996	or Qualified 3	a. Date of Last	Report
2. Principa! F	Place of Business	2a. Mailing Address	········		4. FEI Number		A	polied For
21		26			65-063	-3191	h	lot Applicabl
Suite, Apt	#, etc.	Suite. Apt. #. etc.			5. Certificate of Statu		\$8.75	Additional
22		27			b. Certificate of Statu	s Desired	Fee F	Required
City & Star	te .	City & State			6. Election Campaign	Financing	\$5.00	May Be
23	· · · · · · · · · · · · · · · · · · ·	28	1		Trust Fund Contrib			to Fees
Zην }	Country	Zip	1	intry	8. This corporation ha			s. 199 032,
24	25 9. Name and Address of Currer	nt Ponistand Agant	30	1	Florida Statutes		es No	
LIRI	IETA, RAFAEL	it negistered Agent		B1 Name	10. Name and Addres	es of wan Hafter	erea Agent	
	30 S.W. 87 COURT #11					•		
	VMI FL 33176			82 Street Ado	Iress (P.O. Box Number is	Not Acceptable)		
Luin.	WHI I E 90170			83				
				"				
				84 City			85 Zip	Code
44 Dominion	to the constraint of Contraint COT COT	10 m d C07 44 00 Fig. 15 - Dr	-1 1 11	<u> </u>			FL s Z	
Office or i	to the provisions of Sections 607.050 registered agent, or both, in the State) of Florida. Such chango we	ac authoriza	d by the comore	poration submits this state ation's board of directors. I	ment for the purpo hereby accept th	ose of changing e appointment a	its registere registered
agent fa	am lamiliar with land accept the oblig	ations of Section 607.0505	Florida Stat	tutes.	and board of an obtato.	noroby accept th	c appointment a	a registered
SIGNATURE								
	Signatine, typed or period name of registered ag			o Agent signature requ			ATE	
12.	PD OFFICERS AN	ID DIRECTORS DELETE	13.	T-	ADDITIONS/CHANG	ES TO OFFICERS	THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN THE PERSON NAMED IN TRANSPORT NAMED IN THE PERSON NAMED IN T	_
NAME	UBIETA, RAFAEL	□ bereic	1.170				L. Change	Additio
	8960 S.W. 87 COURT #11		1.2 N					
STREET ADORESS	MIAMI FL 33176			TREET ADDRESS				
CHY-ST-20F TOLE	VD	DELETE		ITY - ST - ZIP			T 6	11111
	CISNEROS, ACELA	F" DETEIR	2.1 TI		•		Change	∐ Add₁tic
NAME	8960 S.W. 87 COURT #11		2.2 N		•			
STREET ADJRESS	MIAMI FL 33176			TREET ADDRESS				
CDY-\$1-ZH	MINITE 00170	Drugge		ITY - ST - ZIP				······
THE		[_] DELETE	3.1 Ti	1			Change	Additio
NAME			3.2 N	AME				
STREET ADDRESS			3 3 SI	TREET ADDRESS				
CILT - ST - 7IP				ITY-SI-ZIP	·	**************************************		
TILLE		DELETE	4.1 Ti				Change	Addition
NAME			4.2 N	IAME				
STREET ACCURESS		•	4.3 SI	TREET ADDRESS				
CH1-ST-7F			4.4 CI	TY-\$T-ZIP				
1111		☐ DELETE	51 TI	TLE			Change	Additio
NAME			52 N/	AME				
STREET ADDRESS			5.3 \$1	TREET ADDRESS				
C-TY-ST-ZIP			5.4 CI	TY-ST-ZIP				
THEE		DELFTE	6.1 T/	TLE			☐ Change	Addilio
NAM:			6.2 N	AME			-	
STREET ADDRESS			6.3 S1	IREET ADDRESS				
Party 63 200				TY-ST-ZIP				
CCTY - SD - 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 other or director of the purporation 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 changed, or on an attachment with an address.

SIGNATURE: