

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 29, 2002 8:00 am
Secretary of State
05-29-2002 93599 017 ***150.00

DOCUMENT # **796000036995** ✓
1. Entity Name
Home Mortgage Loans (TC) Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 9445 SW 40th St		3. Mailing Address 9445 SW 40th St	
Suite, Apt. #, etc. 2nd Floor		Suite, Apt. #, etc. 2nd Floor	
City & State Miami		City & State Miami, FL	
Zip FL 33165	Country USA	Zip 33165	Country USA

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0663816	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Carlos Valdes 9445 SW 40th St 2nd Floor Miami FL 33165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President George Jaffe 9445 SW 40th St 2nd Floor Miami FL 33165
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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

CR2E034B (12/01)