2002 UNIFORM BUSINESS REPORT (UBR)

P96000095432 DOCUMENT

Country

1001 W. CYPRESS CREEK RD., STE. 308 FORT LAUDERDALE FL 33309-1950

the obligations of registered agent

6. Name and Address of Current Registered Agent

1. Entity Name

ONE SOURCE MORTGAGE CORP.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

PENDAS, TOM

Zip

1001 W. CYPRESS CREEK RD., STE. 308

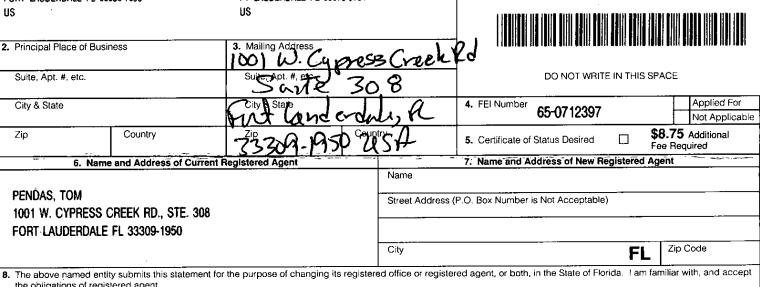
FORT LAUDERDALE FL 33309-1950

Mailing Address

PO BOX 5184

FT LAUDERDALE FL 33310-5184

FILED Sep 17, 2002 8:00 am Secretary of State 09-17-2002 90107 035 ***150.00



the congat	totto or rogiotoros agoria						
SIGNATURE.	Signature, typed or printed name of registered agent and ti	tle if applicable. (NOTE: I	Registered Agent signature rec	quired when reins	stating) DA	TE	
9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)		FILE NOW!!! FEE IS \$550.00 After September 13, 2002 Fee will be \$750.00 Make Check Payable to Department of State			10. Election Campaign Financing Trust Fund Contribution.		May Be I to Fees
11.	OFFICERS AND DIR	ECTORS	12.	ADD	ITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD PENDAS, TOM 1001 WEST CYPRESS CREEK ROAI FT. LAUDERDALE FL 33309-1950	Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-2IP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRESS			☐ Change	☐ Addition

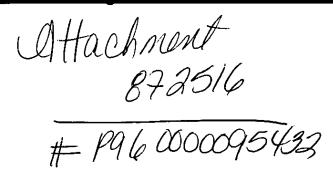
City

ation supplied with this filing loes not chalify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information plemental eport is true and accurate and trial my signature shall have the same legal effect as if made under oath; that I am an officer or director or stustee empowered to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 in Bloc I hereby certify that the information indicated on this report or su

CITY-ST-ZIP

CITY-ST-ZIP

ياجي ال^{رسمي}ة



September 13, 2002

Florida Department of State Division of Corporations P.O Box 6327 Tallahassee, FL 32314

The purpose for this letter is to inform the Department of Corporations that One Source Mortgage Corp. never received the first notice to file the Uniform Business Report, possibly because it was send to a Post Office Box which we no longer use.

Thank you very much,

Tom Pendas, President

One Source Mortgage Corp. 954-202-5099 xt 329