

H98000022858

APPROVED
AND
FILED

1998 DEC -8 PM 4:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPLICATION FOR REINSTATEMENT	FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000009054

1. Corporation Name

1-A Mortgage Corp.

REINSTATEMENT '98

SCC 12-8-98

Principal Place of Business		Mailing Address		3. Date Incorporated or Qualified 1/29/97	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address	4. FBI Number	Applied For		
21 798 Crandon Boulevard	26 798 Crandon Boulevard	65-0745847	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required		
22 Suite 8	27 Suite 8	6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees		
City & State	City & State	B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
23 Key Biscayne FL	28 Key Biscayne FL				
Zip	County	Zip	County		
24 33149	25 Miami-Dade	29 33149	30 Miami-Dade		

9. Name and Address of Current Registered Agent

Lizabeth F. Calvo
328 Crandon Boulevard
Suite 226
Key Biscayne, FL 33149

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 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 LIZABETH CALVO by L.A. URIARTE AS ATTORNEY IN FACT, 12/8/98

Signature, typed or printed name of registered agent and title of applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P.D. ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Antonio G. Aguirre	1.2 NAME	
STREET ADDRESS	798 Crandon Boulevard	1.3 STREET ADDRESS	
CITY-ST-ZIP	Suite 8 Key Biscayne FL 33149	1.4 CITY-ST-ZIP	
TITLE	V, S, T, D ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Domingo E. Cortez	2.2 NAME	
STREET ADDRESS	798 Crandon Boulevard	2.3 STREET ADDRESS	
CITY-ST-ZIP	Suite 8 Key Biscayne FL 33149	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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 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 12 or Block 13 or on attachment with an address.

SIGNATURE Antonio G. Aguirre by Antonio G. Aguirre, President, by L.A. Uriarte as attorney in fact 12-8-98

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

H98000022858

Florida Department of State
Division of Corporations
Public Access System
Sandra B. Mortham, Secretary of State

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (305)672-0686
Fax Number : (305)672-9110

CORPORATION REINSTATEMENT

1-A MORTGAGE CORP.

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