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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000016116 (0)

FILED May 20 1998 8:00am Secretary of State

	LUS HOME MORTGAGE C	ENTER, INC.				
2060 NORTHEAST 208TH STREET 2060 NORTHEAST 208TH NORTH MIAMI BEACH FL 33179 NORTH MIAMI BEACH FL			4 etpest			
						40.004.05
					DO NOT WRITE IN TH	IS SPACE
					3. Date Incorporated or Qualified	İ
A Principal (Plane of Pupinses	2a. Mailing Address			02/19/1997	
·				4. FEI Number 65-0732584	Applied For	
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						Not Applicable \$8.75 Additional
22 27					5. Certificate of Status Desired	Fee Regulred
City & State City & State					6. Election Campaign Financing	\$5.00 May Be
28					Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	/	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes 🔲 No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	ed Agent
VE	RNICK, HOWARD		81	Name		
206	NORTHEAST 208TH STREET		82	Street Add	ress (P.O. Box Number is Not Acceptable)	
NO	RTH MIAMI BEACH FL 33179					
			83	İ		
			84	City		. 85 Zip Code
				1		▝▙▕▕
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida State	ites, the above	e-named corp	poration submits this statement for the purpos tion's board of directors. I hereby accept the	e of changing its registered
agent. I a	am familiar with, and accept the oblig	pations of, Section 607.0505, F	lorida Statute	s ine corporar 8.	norts board of directors. Thereby accept the	appointment as registered
SIGNATURE						
	Signature typed or printed name of registered as			ent signaturu requi	ired when reinslating) DAT	·
12,		ND DIRECTORS L DELETE	13.	·	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
TITLE	PD NEDWICK HOWARD	בַן טנננונ	1.1 TITLE			CLIQUIGE CT Vacinion
NAME	VERNICK, HOWARD 2060 NORTHAST 208TH STR	CCT	1.2 NAME	, ADDOCCO		
STREET ADDRESS	NORTH MIAMI BEACH FL 33		1.3 STHEET			
CITY-ST-ZIP TITLE	HORTH MIAMI DEACH FE 33	DELETE	1.4 CITY - 5 2.1 TITLE	SI-ZIP		Change Addition
NAME	1	L_J OLCEIL	2.2 NAME	İ		C cutality C viacutor
=				, ADDOCCO		
STREET ADDRESS CITY-ST-ZIP			2.3 STREET			
TITLE	DELÉTE		2. 4 CITY - 1 3.1 TITLE	01 · 21F		Change Addition
NAME			3.2 NAME			
STREET ADDRESS	1		3.3 STREET	ADDRESS		
CITY-ST-ZIP			3 4. CITY-			
TITLE		DELETE	4.1 TITLE	====		Change Addition
NAME			4. 2 NAME			
STREET ADDRESS	i		4.3 STREET	ADDRESS		
CITY-ST-ZIP			4.4 CITY-S	ST-ZIP		
TITLE	DELETE		5.1 TITLE			Change Addition
NAME			5.2 NAME			•
STREET ADDRESS			5.3 STREET	ADDRESS		j
CITY-ST-ZIP			5.4 CITY - S	ST - ZIP]
TITLE		DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME	Į.		6.2 NAME			Į
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP	· .		6.4 CITY-S	Y-ZIP		
					Continue (10 07/0Vi) Florida Ctatulas I fueba	

14. 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 annual report or suppliemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of trusted impowered 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 an attachment with an address.

CICALATUDE.

4/79/95