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

P97000023827 (3) DOCUMENT # 1. Corporation Name

STATESIDE LENDING, INC.

Principal Place of Business

Mailing Address

FILED Apr 23 1998 8:00am Secretary of State



13899 BISCAYNE BLVD. MIAMI FL 33181		13899 BISCATNE BLVD. MIAMI FL 33181				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified	\neg	
						03/17/1997		
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied Fo)[
13899	B is cayne Blvd.	26 13899 Biscayne Blvd.				65-0741319 Not Applica	able	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additiona	al I	
2 Suit	e # 317		Suite # 317			Fee Required		
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be		
3 N. Mi	lami Beach, FL	28 N. Miami Beach, FL				Trust Fund Contribution Added to Fees		
Zip	Country	Zip	\vdash	ountry		8. This corporation owes or has paid the current year Intangible		
4 3318		29 33181	30	US	A	Personal Property Tax due June 30. Yes X No		
	9. Name and Address of Current	Registered Agent		81	Name	10. Name and Address of New Registered Agent		
FILINGS, INC.				"	Name			
3732 N.W. 16TH STREET FT. LAUDERDALE FL 33311-4132				82	Street A	Street Address (P.O. Box Number is Not Acceptable)		
				83				
				83				
				84	City	85 Zip Code		
				┸┚	L	FL 24 0000		
office or r	edistered agent, or both, in the State.	of Florida. Such channe was i	authoriz	ed by	the corp	corporation submits this statement for the purpose of changing its registed poration's board of directors. I hereby accept the appointment as registers	∍rea ed	
agent I a	m familiar with, and accept the obliga	tions of, Section 607.0505, Fl	lorida St	atutes	3.	, , , , , , , , , , , , , , , , , , , ,		
SIGNATURE								
	Signature, typed or printed name of registers diagon				ent signature	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	OFFICERS AND	DELETE	13	TITLE				
TITLE	D Be hrens, Randall					ע – י יי		
NAME	ın.	1.2 NAME		ADDRESS	Behrens, Randall			
STREET ADDRESS	STE. 725, 3111 UNIVERSITY D	rt.	1.3 SINCE 1.4 CITY-		ADDRESS	13899 Biscayne Blvd. # 317		
CITY-ST-ZIP TITLE	CORAL SPRINGS FL 33065	DELETE	_	TITLE	11-212	N. Miami Beach, FL 33181	dition	
NAME			2.2 NAME		}			
STREET ADDRESS					ADDRESS			
					!			
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE			Change Ado	dition	
NAME			3.2 NAME					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			ı ı	CITY-S	- 1			
TITLE		DELETE		TITLE	<u> </u>	Change Ado	dition	
NAME			4. 2	NAME				
STREET ADDRESS			4.3	STREET	ADDRESS			
CITY-ST-ZIP				CITY-S	- 1			
TITLE		☐ DELETE	_	TITLE		Change Add	dition	
NAME			5.2	NAME				
STREET ADDRESS			5.3	STREET	ADDRESS			
CITY-ST-ZIP			5.4	CITY-S	ST-ZIP			
TITLE		☐ DELETE		TITLE		Change Add	dilion	
NAME			6.2	NAME				
STREET ADDRESS			6.3	STREET	ADDRESS			
CITY-ST-ZIP				CITY-S	- 1			
14 Lhereby r	certify that the information supplied wi	th this filing does not qualify	for the e	xemo	tion state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the informa	tion	
officer or	on this annual report or supplementa director of the corporation or the rece or Block 13 if changed, or or an altac	river or trustee empowered to	curate a execute	nd thi ≥ this	at my sigi report as	nature shall have the same legal effect as if made under oath; that I am a required by Chapter 607, Florida Statutes; and that my name appears in	ıπ	