

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000029696

1. Entity Name

THE HOME LOAN SPECIALIST, INC.

**FILED**  
**Apr 22, 2000 8:00 am**  
**Secretary of State**

04-22-2000 90009 019 \*\*\*150.00

Principal Place of Business

Mailing Address

~~153 SEVILLA AVE.~~  
~~CORAL GABLES FL 33134~~

~~153 SEVILLA AVE.~~  
~~CORAL GABLES FL 33134 6886~~

2. Principal Place of Business  
1741 Alton Road

3. Mailing Address  
1741 Alton Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
Miami Beach, FL 33139

City & State  
Miami Beach, FL 33139

Zip  
33139

Country  
USA

Zip  
33139

Country  
USA

4. FEI Number  
65-0760759

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

M.J.F. REGISTERED AGENT CORP

Street Address (P.O. Box Number is Not Acceptable)

153 SEVILLA AVENUE

City

CORAL GABLES

FL

Zip Code  
33134

8. The above named agent is authorized to execute this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Handwritten signature of M.J.F. Registered Agent Corp

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/2000

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 \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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 ~~DPS~~  
NAME ETTEDGUI, DANIEL  
STREET ADDRESS ~~153 SEVILLA AVE.~~  
CITY-ST-ZIP ~~CORAL GABLES FL 33134~~

☐ Delete

TITLE ~~VP~~  
NAME ~~ETTEDGUI, DANIEL~~  
STREET ADDRESS ~~1741 Alton Rd.~~  
CITY-ST-ZIP ~~Miami Beach, FL 33139~~

☐ Delete

TITLE ~~VP~~  
NAME ~~BERY, BENY~~  
STREET ADDRESS ~~1741 Alton Rd.~~  
CITY-ST-ZIP ~~Miami Beach, FL 33139~~

☐ Delete

TITLE ~~VP~~  
NAME ~~BERY, BENY~~  
STREET ADDRESS ~~1741 Alton Rd.~~  
CITY-ST-ZIP ~~Miami Beach, FL 33139~~

☐ Delete

TITLE ~~VP~~  
NAME ~~BERY, BENY~~  
STREET ADDRESS ~~1741 Alton Rd.~~  
CITY-ST-ZIP ~~Miami Beach, FL 33139~~

☐ Delete

TITLE ~~VP~~  
NAME ~~BERY, BENY~~  
STREET ADDRESS ~~1741 Alton Rd.~~  
CITY-ST-ZIP ~~Miami Beach, FL 33139~~

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE VP  
NAME ETTEDGUI, DANIEL  
STREET ADDRESS 1741 Alton Rd.  
CITY-ST-ZIP Miami Beach, FL 33139

☒ Change ☐ Addition

TITLE DP  
NAME BERY, BENY  
STREET ADDRESS 1741 Alton Rd.  
CITY-ST-ZIP Miami Beach, FL 33139

☐ Change ☒ Addition

TITLE   
NAME   
STREET ADDRESS   
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE   
NAME   
STREET ADDRESS   
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE   
NAME   
STREET ADDRESS   
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE   
NAME   
STREET ADDRESS   
CITY-ST-ZIP

☐ Change ☐ Addition

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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR BENY BERY, President 4/10 305-913-5626

Date

Daytime Phone #

CR2E034 (9/99)