

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000039047

1. Entity Name

ALLSTATE MORTGAGE CORP.

DO NOT WRITE IN THIS SPACE

200011131562
01/28/03--01051--002 **450.00

2. Principal Place of Business 17891 S. DIXIE HWY Suite, Apt. #, etc. 2nd FLOOR City & State PALMETTO BAY FL Zip 33157		3. Mailing Address P.O. BOX 432565 Suite, Apt. #, etc. City & State S. MIAMI FL Zip 33243	
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4. FEI Number		☒ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required
7. Name and Address of Current Registered Agent		

DO NOT WRITE IN THIS SPACE

Name MIKE AJABSHIR	
Street Address (P.O. Box Number is Not Acceptable) 930 HIEALAH DR. #9	
City HIEALAH	Zip Code FL 33010

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)		10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SOHEILA AJABSHIR 17891 S.DIXIE HWY 2nd FLOOR PALMETTO BAY FL 33157	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(9)(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 on an attachment with an address, with all other like empowered.

SIGNATURE: MIKE AJABSHIR 01/23/03 305-218-8585
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

January 23, 2003

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314
C/O Loria Poole

RE: ALLSTATE MORTGAGE CORP.
2001 Uniform Business Report

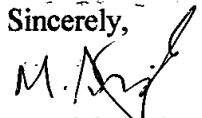
Dear Mrs. Poole,

Please be advised as of today January 23, 2003 I never received any form or notification for the above reference to filing the report, from the Department for 2002 Uniform Business Report.

Please accept this letter as my filing report for the above mentioned corporation and include this filing. See attached \$450.00 for filing.

If you have any questions do not hesitate to call me at (305) 971-2000.

Sincerely,



M. Ajabshir/VP