

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 01 1998 8:00am
Secretary of State

DOCUMENT # **P97000070316 (9)**

Corporation Name

MILLENNEA MORTGAGE INVESTORS, CORP.



Principal Place of Business

**7830 NW 57 STREET
MIAMI FL 33166**

Mailing Address

**7830 NW 57 STREET
MIAMI FL 33166**

DO NOT WRITE IN THIS SPACE

Date Incorporated or Qualified

08/14/1997

FBI Number

65-0773679

Applied For

Not Applicable

Principal Place of Business

21

Suite, Apt. #, etc.

Mailing Address

26

Suite, Apt. #, etc.

City & State

23

City & State

28

Zip

Country

24

25

Zip

Country

29

30

Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

This corporation owes or has paid the current year intangible
Personal Property Tax due June 30 ☐ Yes ☐ No

Name and Address of Current Registered Agent

**GONZALEZ, JORGE L
2801 PONCE DE LEON BLVD SUITE 220
CORAL GABLES FL 33134**

Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

Pursuant to the provisions of Sections 607.0502 and 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

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

(NOTE: Registered Agent's signature required when re-registering)

DATE

OFFICERS AND DIRECTORS

TITLE **DPS** ☐ DELETE
NAME **GONZALEZ, JORGE L**
STREET ADDRESS **7830 NW 57 STREET**
CITY - ST - ZIP **MIAMI FL 33166**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 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 if changed, or on an attachment with an address.

4/20/98 305-992-8291

CR2E034 (10/97)