

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

FILED
Mar 26 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P97000077426 (9)

1. Corporation Name

FIRST SOUTHERN FINANCIAL, INC.



Principal Place of Business

9400 S. DADELAND BLVD.
SUITE 720 C/O George De La Hoz
MIAMI FL 33156
#403
Coral Gables, FL 33146

Mailing Address

C/O George De La Hoz
9400 S. DADELAND BLVD.
SUITE 720 #403 1550 MADRUCA AVE
MIAMI FL 33156 Coral Gables, FL 33146

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

09/08/1997

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 C/O JORGE DE LA HOZ, CPA
Suite, Apt. #, etc.
22 1550 MADRUCA AVE #403
City & State
23 CORAL GABLES, FL
Zip
24 33146

2a. Mailing Address

26 C/O JORGE DE LA HOZ, CPA
Suite, Apt. #, etc.
27 1550 MADRUCA AVE #403
City & State
28 CORAL GABLES, FL
Zip
29 33146

City & State

City & State

Zip

Zip

Country

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHOOS, S C
15600 S.W. 288TH ST.
SUITE 312
HOMESTEAD FL 33033

81 Name

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

83

84 City

FL

85 Zip Code

11. 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 signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME BERG, ROBERT S
STREET ADDRESS 9400 S. DADELAND BLVD. SUITE 720
CITY-ST-ZIP MIAMI FL 33156

TITLE STD ☐ DELETE

NAME WEMPLE, STEVE M
STREET ADDRESS 9400 S. DADELAND BLVD. SUITE 720
CITY-ST-ZIP MIAMI FL 33156

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

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 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.

SIGNATURE:

2/24/98 2/24/98 2/24/98

CR2E034 (10/97)