

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

FILED

May 01 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 #
1. Corporation Name
P970000079637
CALDWELL LENDING, INC.

Principal Place of Business
2655 Le Jeune Road
Suite 520
Coral Gables, FL 33134

Mailing Address
2655 Le Jeune Road
Suite 520
Coral Gables, FL 33134

DO NOT WRITE IN THIS SPACE

| | | | |
|----------------------------------|----------------------------------|---|--|
| 2. Principal Place of Business | 2a. Mailing Address | 3. Date Incorporated or Qualified | 4. FEI Number |
| 21 2655 Le Jeune Road | 26 2655 Le Jeune Road | 9/15/98 | 650781265 |
| 22 Suite, Apt. #, etc. 520 | 27 Suite, Apt. #, etc. 520 | 5. Certificate of Status Desired <input type="checkbox"/> | Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/> |
| 23 City & State Coral Gables, FL | 28 City & State Coral Gables, FL | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 24 Zip 33134 | 29 Zip 33134 | 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | \$5.00 May Be Added to Fees |
| 25 Country U.S.A. | 30 Country U.S.A. | | |

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

| | |
|---|-------------|
| 81 Name | 85 Zip Code |
| 82 Street Address (P.O. Box Number is Not Acceptable) | |
| 83 | |
| 84 City | FL |

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 Maria Caldwell MARIA CALDWELL (President) 4/24/98

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|-------------------------|---|---|
| TITLE | PRESIDENT | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Maria E. Caldwell | 1.2 NAME | |
| STREET ADDRESS | 2655 Le Jeune Road #520 | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | Coral Gables, FL 33134 | 1.4 CITY-ST-ZIP | |
| TITLE | VICE-PRESIDENT | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Maria M. Caldwell | 2.2 NAME | |
| STREET ADDRESS | 2655 Le Jeune Road #520 | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | Coral Gables, FL 33134 | 2.4 CITY-ST-ZIP | |
| TITLE | | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 3.2 NAME | |
| STREET ADDRESS | | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 3.4 CITY-ST-ZIP | |
| TITLE | | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 4.2 NAME | |
| STREET ADDRESS | | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 4.4 CITY-ST-ZIP | |
| TITLE | | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 5.2 NAME | |
| STREET ADDRESS | | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 5.4 CITY-ST-ZIP | |
| TITLE | | 6.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME | |
| STREET ADDRESS | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | | 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: Maria E. Caldwell MARIA E. CALDWELL 4/24/98 (305) 444-1901

CR2E034 (10/97)