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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700081684 (7)

FILED Mar 17 1998 8:00am Secretary of State

GUARANTEE MORTGAGE INC.		 	1101 (1818 81181) TOM PIOL 1481
Principal Place of Business Mailing Address			8/8/ (18/8 B)/8/ (8/8/ 8/8/ 188)
9445 FOUNTAINEBLEAU BLVD #206 9445 FOUNTAINEBLEAU BLVD #206 MIAMI FL 33172 MIAMI FL 33172		DO NOT WRITE IN THI	S SPACE
		3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address		09/19/1997 4. FEI Number	Applied For
21 1201 Brickell Ave 28 1201 Brickell Ave		65-0788044	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 610		S. Certificate of Status Desired	Fee Required
City & State City & State 23 Miami 28 Miami		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33131 Country Zip 33131 3	Country USA	This corporation owes or has paid the c Personal Property Tax due June 30.	urrent voer Intangible
9. Name and Address of Current Registered Agent	1	10. Name and Address of New Registered	Agent
VIGIL, MICHAEL EDMUND	81 Name		
DAME FOUNTAINED FALL DIVID #000		ss (P.O. Box Number is Not Acceptable)	
MIAMI FL 33172		as (1.0. box 140/100) is 140/ Acceptable)	
	83		
	84 City		85 Zip Code
		Fi	_
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or bottly in the State of Florida. Such change was aut agent. I am familiat with, and accept the obligations of, Section 607.0505, Florida.	, the above-named corpo horized by the corporation	pration submits this statement for the purpose on's board of directors. I hereby accept the ar	of changing its registered pointment as registered
	da Statutes.	9	3-11-42
	ichael Vigi		3-11-98
12. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE DP DELETE	1.1 TITLE		Change Addition
NAME VIGIL, MICHAEL EDMUND	1.2 NAME		Ĭ
STREET ADDRESS 9445 FOUNTAINEBLEAU BLVD #206	1.3 STREET ADDRESS		
CITY-ST-ZIP MIAMI FL 33172	1.4 CITY-ST-ZIP		
TITLE DELETE	2.1 TITLE		Change Addition
NAME	2.2 NAME	•	
STREET ADDRESS	2.3 STREET ADDRESS		1
CITY-SI-ZIP TITLE DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	3.2 NAME		Contraction The Videostifus
STREET ADDRESS	3.3 STREET ADDRESS		Ì
CITY-ST-ZIP	3.4. City-St-ziP		
TITLE DELETE	4,1 TITLE		Change Addition
NAME	4.2 NAME		
STREET ADDRESS	4.3 STREET ADDRESS		į
CITY-ST-ZIP	4.4 CITY+ST-ZiP	· · · · · · · · · · · · · · · · · · ·	
TITLE DELETE	5.1 THTLE		Change Addition
NAME	5.2 NAME		
STREET ADDRESS	5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE DELETE	5.4 CITY-ST-ZIP		Change Addition
	6.1 TITLE		Change Addition
NAME Street address	6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	6.4 City-St-Zip		į
1411-31-415			The state of the s

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 peport or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the opporation 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: DO TO COLOR

Murhard Viall - President - 3/1/98

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