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PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000082309 (0)

FILED May 05 1998 8:00am Secretary of State

UNITED LENDERS SERVICES, INC. Principal Place of Business Mailing Address 11890 S.W. 8TH STREET. SUITE 303 11890 S.W. 8TH STREET, SUITE 303 MIAMI FL 33184 MIAMI FL 33184 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/22/1997 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 Added to Fees 28 Ζiρ Country 8. This corporation owes or has paid the current year Intangible ☐ No 24 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name HERNANDEZ, ROLANDO 11890 S.W. 8TH STREET, SUITE 303 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33184 83 84 City 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, typod or printed harne of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) (10/97)12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change TITLE PSTD 1.1 TITLE NAME HERNANDEZ, ROLANDO 1.2 NAME ROLANDO HERNAMUEZ CR2E034 11890 S.W. 8TH STREET, SUITE 303 11890 BW 8 ST SUITE 303 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33184** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE Maria Quant 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 11890 SW B 91 CITY-ST-ZIP 2 4 CITY-ST-ZIP MIMMI EL Change DELETE Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change __ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 51 TIME NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS indicated on this annual report or supplied with this filing does no officer or director of the corporation or the received or yukane employed to Block 13 if changed, or on an attached CITY-ST-ZIP 6.4 C(TY - ST - Z)P qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information of and accurate and that my signature shall have the same legal effect as if made under oath; that I am an an exercise the same legal effect as if made under oath; that I am an exercise to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the informatindicated on this annual report

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