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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **P97000087392**1. Corporation Name

THE HOMELOAN STORE, INC.

Principal Place of Business

Mailing Address

5502 NW 41ST AVENUE

STREET ADDRESS

5502 NW 41ST AVENUE

## **FILED** Jan 21, 1999 8:00am Secretary of State 01-21-1999 90039 008 \*\*\*150.00



COCONUT CR	EEK FL 33073	COCONU	1 CREEK FL 330/3			DO NOT WRI	TE IN THIS S	PACE	
	•					<ol> <li>Date Incorporated or Qualifed 10/09/1997</li> </ol>			
2. Principal i	Place of Business	2a. Maili	ng Address			4. FEI Number		Ar	plied For
21		26				65-0791000		No	t Applicable
Suite, Apt. #, etc Suite, Apt. #, etc 27				5, Certifcate of Status Desired		\$8.75 Additional Fee Required			
	City & State City & State					6: Election Campaign Financing Trust Fund Contribution		\$5.00 Added	
Zip 24	Country 25	Zip 29	3	Country		This corporation owes the curr     Personal Property Tax.		gible ] Yes	□No
	9. Name and Address of Curre	ent Registered		<del>-</del>		10. Name and Address of New I	Registered Ag	jent	
			<del></del>	81	Name	A3-144			,
BRAUNSTEIN, EVAN 5502 NW 41ST AVENUE				82	82 Street Address (P.O. Box Number is Not Acceptable)				
	CONUT CREEK FL 33073			83			Tr. Vita	•	- 174 € E\$
									1.66 July 19.
				84	City		FL	<b>85</b> Zip	Code
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applica	ble. (NOTE: Re	egistered Agen		ed when reinstating)	DATE		
12.	-g	ND DIRECTOR		13.		ADDITIONS/CHANGES TO OF			
TITLE	P		☐ DELETE	1.1 TITLE			1	Change	Additio
NAME	BRAUNSTEIN, EVAN			1.2 NAME					
STREET ADDRESS	1			1.3 STREET	ADDRESS				
CITY-ST-ZIP	COCONUT CREEK FL 33073			1.4 CITY-ST	- ZIP	•			
TITLE	•		☐ DELETE	2.1 TITLE				Change	☐ Additio
NAME				2.2 NAME					
STREET ADDRESS	s			2.3 STREET	ADDRESS				
CITY-ST-ZIP	45.0			2. 4 CITY-S	r-21P				
TITLE	W. S. A. W. Sala	,	DELETE	3.1 TITLE				Change	Addition
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET	ADDRESS				1 4 4
CITY-ST-ZIP	125		·	3.4. CITY-S	r-ZIP				
TITLE	·		☐ DELETE	4.1 TITLE				Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS	3	. *		4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY-ST	-ZIP			<del></del>	
TITLE	-		☐ DELETE	5.1 TTTLE			ĺ	Change	Addition
NAME	* - 1 - 1			5.2 NAME	-	R(N)			
STREET ADDRESS	3			5.3 STREET					
CITY-ST-ZIP	, f			5.4 CITY-ST	-ZIP				
TITLE	188 AP - 198 - 198		☐ DELETE	6.1 TITLE	Į –		ſ	Change	Addition

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, with all other like empowered.

6.3 STREET ADDRESS