

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000000512**

1. Corporation Name

TROPICAL HOME MORTGAGE, INC.

Principal Place of Business

1306 - 23RD AVENUE EAST
TAMPA FL 33605-1728

Mailing Address

1306 - 23RD AVENUE EAST
TAMPA FL 33605-1728

FILED
Jul 26, 1999 8:00 am
Secretary of State

07-26-1999 90002 018 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1998

4. FEI Number

59-3485512

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☒ No

2. Principal Place of Business

21 **4732 N. DALE MABRY HWY**

Suite, Apt. #, etc.

22 **408**

City & State

23 **TAMPA, FL**

Zip

24 **33614**

Country

25 **USA**

2a. Mailing Address

26 **4732 N. DALE MABRY HWY**

Suite, Apt. #, etc.

27 **408**

City & State

28 **TAMPA, FL**

Zip

29 **33614**

Country

30 **USA**

9. Name and Address of Current Registered Agent

BUSTO, NORA
1306 - 23RD AVENUE EAST
TAMPA FL 33605-1728

10. Name and Address of New Registered Agent

81 Name

NORA BUSTO

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

4732 N. DALE MABRY HWY.

83

SUITE 408

84 City

TAMPA

FL

85 Zip Code

33614

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

Martha Benitez V. PRES/DIRECTOR

Signature, typed or printed name of registered agent and title, applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

13 July 1999

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **BENITEZ, MARTHA J**
STREET ADDRESS **1306 - 23RD AVENUE EAST**
CITY-ST-ZIP **TAMPA FL 33605-1728**

TITLE ☐ DELETE

NAME **BUSTO, NORA**
STREET ADDRESS **6110 EAST 111TH AVENUE**
CITY-ST-ZIP **TEMPLE TERRACE FL 33617**

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:

Martha Benitez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13 July 1999 (813) 874-0233

Date

Daytime Phone #

0085954

CR2E034 (5/99)

P98000000512
594962-90002-18



PH. (813) 874-0233

FAX (813) 874-0304

July 13, 1999

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

RE: Document # P98000000512
Tropical Home Mortgage, Inc.

Dear Sirs:

We are in receipt of your 2nd Notice of the 1999 Profit Corporation Annual Report packet. We regret to inform you that we have never received a notice prior to this one, either at my home address showing on this report or at the change of address provided to the State when we opened our office, located at the address on our letterhead.

We established our corporation last year, in 1998, and were under the impression that we would received a renewal of the corporate papers. However, in the latter part of May, 1999, when we still had not received anything, we went to the Division of Corporations Web Site and found that we were still an active corporation, so our thought was that this is done every two years and we would not get papers until the end of 1999 for the year 2000. We had no idea that it would be due June 11, 1999 or we would have again called the State to get the annual report packet and pay it on a timely basis.

Although we have mortgage broker's licenses, a registered corporation, and a licensed mortgage brokerage business license, all at our Dale Mabry location, we have had to call the State a couple of times to send our income tax forms because we had not received them, either at my home address or at our business office.

The USPS has documented evidence that my home mail at 23 Avenue has been mis-delivered, returned to the sender as "attempted delivery - unknown", "moved no forwarding" to name a few. So I do not know if any prior mailings from you to my home address were sent back by the USPS.