2002 Uniform Business Report (UBR)

Mar 29, 2002 8:00 am DOCUMENT # P98000009952 **Secretary of State** 1. Entity Name 03-29-2002 90369 001 ***150.00 SUNSHINE STATE MORTGAGE INVESTMENT CORPORATION 03-29-2002 90369 002 *****8.75 Principal Place of Business Mailing Address 1460 NW 107 AVE 1460 NW 107 AVE MIAM! FL 33172 **MIAMI FL 33172** Principal Place of Business DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For & State 65-0908159 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name LLAGUNO, JORGE A Street Address (P.O. Box Number is Not Acceptable) 1460 NW 107 AVE #P **MIAMI FL 33172** Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida or redistered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. (9/01) ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME LLAGUNO, JORGE A NAME CR2E034 STREET ADDRESS STREET ADDRESS 9800 SW 155 AVE. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33196 ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete: NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: