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 # P98000014213

Country

USA

9. Name and Address of Current Registered Agent

1. Corporation Name

SPRINGS LENDING CORP.

Principal Place of Business

481 DE SOTO DRIVE-MIAMI-SPRINGS FL 33100

2. Principal Place of Business

Suite 109-A

Suite, Apt. #, etc.

Medley,

City & State

33166

23

24

7911 NW 72nd Avenue

25

Mailing Address

481 DE SOTO DRIVE MIAMI SPRINGS FL 33166

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

26

27

28

29

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90062 041 ***150.00



	DO NOT WRITE IN THIS SPACE
3.	Date Incorporated or Qualifed
	02/12/1998

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

4. FEI Number

65-0811606

5. Certifcate of Status Desired

6. Election Campaign Financing

8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

Trust Fund Contribution

Personal Property Tax.

				INGILIE					
ENDARA, JORGE A 481 DE SOTO DRIVE			82	82 Street Address (P.O. Box Number is Not Acceptable)					
MIAMI SPRINGS FL 33166					, , , , , , , , , , , , , , , , , , , ,				
				075		•	0.E 7:-	Code	
			84	City	ı	=L	85 Zip	Code	
office or r	to the provisions of Sections 607.0502 and 607.1508 egistered agent, or both, in the State of Florida. Such m familiar with, and accept the obligations of, Section	n change was auth	orized by	the corpo	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of ch opointn	anging in nent as i	s registered egistered	
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable	a (NOTE: Re	gistered Ager	nt signature o	equired when reinstating) DATE				
12.	OFFICERS AND DIRECTORS	_	13.		ADDITIONS/CHANGES TO OFFICERS	AND	DIRECT	ORS IN 12	
TITLE	PD	DELETE	1.1 TITLE		,		Change	Addition	
NAME	ENDARA, JORGE A		1.2 NAME						
STREET ADDRESS	104 DE COTO DENIE		1.3 STREET	TADDRESS					
CITY-ST-ZIP	MIAMI SPRINGS FL 33166		1.4 CITY-S	T-ZIP					
TITLE	VD	DELETE	2.1 TITLE				Change	Addition	
NAME	ENDARA, XIOMARA G		2.2 NAME						
STREET ADDRESS	ANA DE COTO DONE		2.3 STREET	TADORESS	•				
CITY-ST-ZIP	MAAN OPPINION FL 00400		2.4 CITY-S	T-ZIP		•			
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	TADORESS					
CITY-ST-ZIP			3.4. CITY- S	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE				Change	Addition	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET	TADDRESS					
CITY-ST-ZIP			4.4 CITY-S	T-ZIP					
TITLE		☐ DELETE	5.1 TITLE			[_ Change	e	
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET	T ADDRESS					
CITY-ST-ZIP			5.4 CITY-S	T-ZIP					
TITLE		DELETE	6.1 TITLE				_ Change	Addition	
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	T ADDRESS					
CITY-ST-ZIP	_		6.4 CITY-S	T-ZIP					

Country

30

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 for on any attachment with an address, with all other like empowered.

SIGNATURE: <

TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JORGE A ENDARA - PRESIDENT

01/11/99

(305)888-8081