2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000015654

Country

6. Name and Address of Current Registered Agent

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

DMP MORTGAGE, INC.

Principal Place of Business 417 UNIVERSITY DR CORAL SPRINGS FL 33065

2. Principal Place of Business

BETTLER, WILLIAM

5670 N.W. 122ND AVENUE **CORAL SPRINGS FL 33076**

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

Suite, Apt. #, etc.

City & State

Zip

SIGNATURE

SIGNATURE

Mailing Address

3. Mailing Address

City & State

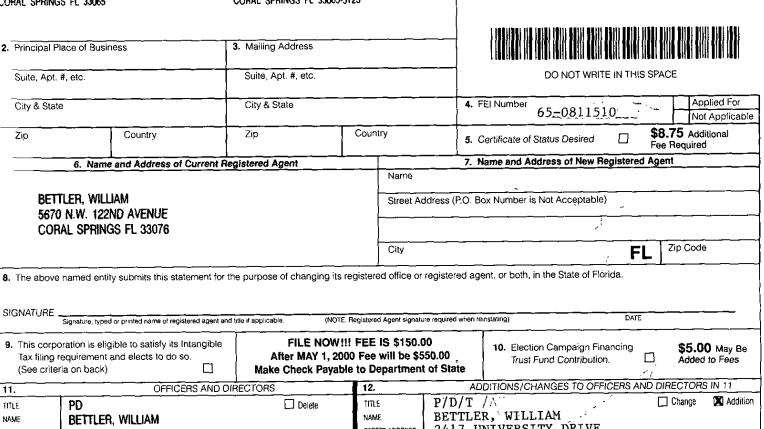
Suite, Apt. #, etc.

2417 UNIVERSITY DR CORAL SPRINGS FL 33065-5123

FILED May 04, 2000 8:00 am Secretary of State

05-04-2000 90164 026 ***150.00

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Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. $P/D/T / \Lambda$ TITI F TITLE PD ☐ Delete BETTLER, WILLIAM NAME BETTLER, WILLIAM 2417 UNIVERSITY DRIVE STREET ADDRESS STREET ADDRESS 5670 N.W. 122ND AVENUE CORAL SPRINGS, FL 33065 CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33076 Change X Addition VP/D/S/AT ☐ Delete TITLE TITLE NAME GITLAN, HOWARD A NAME STREET ADDRESS 2417 UNIVERSITY DRIVE STREET ADDRESS CITY~ST-ZIP CORAL SPRINGS, FL 33065 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ☐ Change ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP

Country

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2000 Fee will be \$550.00

Name

City

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 of trusted 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 attack

WILLIAM BETTLER

<u>k</u>quired NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESIDENT 4-28-2000

Daytime Phone #

CR2E034 (9/99)