

01-02

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 JAN 14 AM 9:24

SEC. OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

PA8000061719

1. Entity Name

Mortgage Capital & Consulting Group, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

17600 COLLINS AVE.

3. Mailing Address

17600 COLLINS AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SUNNY ISLES, FL

City & State

SUNNY ISLES, FL

Zip

33160

Country

U.S.A.

Zip

33160

Country

U.S.A.

4. FEI Number

91-1900917

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Luis Gonzalez

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

3370 NE 190TH ST #715

City

Aventura

FL

Zip Code

33170

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when relocating.)

1/2/03.

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so (See criteria on back) ☐

January 1 - May 1: Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: President
NAME: Luis Gonzalez
STREET ADDRESS: 17600 COLLINS AVENUE
CITY- ST- ZIP: SUNNY ISLES, FL 33160

TITLE:
NAME:
STREET ADDRESS:
CITY- ST- ZIP:
300009668273
12/24/02--01034--001 **150.00

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**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-19-02

CR2E034B (12/01)

98 1115

JOEL SANDERS & COMPANY, P. A.
CERTIFIED PUBLIC ACCOUNTANTS

1535 NORTH PARK DRIVE
SUITE 103
WESTON, FLORIDA 33326

MEMBER: AMERICAN
INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

TEL: (954) 385-9290
FACSIMILE: (954) 385-9284
EMAIL: jscpa1@msn.com

MEMBER: FLORIDA
INSTITUTE OF CERTIFIED
PUBLIC ACCOUNTANTS

December 9, 2002

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

Re: Mortgage Capital & Consulting Group, Inc.
Document #: P98000061719
Fein: 91-1900917

Gentlemen:

I have been retained by the above referenced taxpayer. To date, the taxpayer has not received any documentation regarding filing this report for the current year. Their mailing address was changed in 2001 and is not reflected on the current Corporations Online Public Inquiry.

Enclosed please find the Uniformed Business Report for the year ending 2002 for the above referenced entity along with a check totaling \$150.00 to cover the annual report fees.

Current address is as follows:

Mortgage Capital & Consulting Group, Inc.
17600 Collins Avenue
Sunny Isles, FL 33160

Please review the taxpayers file and advise accordingly.

Very truly yours,



Joel Sanders, CPA