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2001 UNIFORM BUSINESS REPORT (UBR)

08-01-2001 90195 009 ***150.00
FILED P98000065669
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 OCT 16 PM 7:21

DOCUMENT # P98000065669 (W)

1. Entity Name

T&L MORTGAGE BANKERS INC

Principal Place of Business — Mailing Address

1840 CORAL WAY STE204

CORAL GABLES FL 33145

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 650854168 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
Amerilawyer 343 ALMERIA AVE. CORAL GABLES FL 33134	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 ______________________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

[illegible]

10. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD TALAT GAMIL 2016 BAY DR MIAMI BEACH, FL. 33144	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (11/00)

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: ______________________________ 9/18/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE

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TRUTH & LENDING MORTGAGE BANKERS, INC.

T&L

RESIDENTIAL AND COMMERCIAL LOANS

Thursday, October 11, 2001

Dear Sirs

I am writing in regard to the dissolution of my Co, T & L Mortgage bankers, Inc. I have no idea why is suspended I have paid my dues on time and ever since I have not heard from you .To day I called your offices and been told you have sent me a correspond in August 2001 and I have not replied . Sorry I have received nothing in August.

My Registered Agent remains the same ever since I established my CO, 1998 which is AMERILAWYER . Please correct this miss understanding and if there is any thing needed from me please do not hesitate to contact me

Thank you,

Talat Gamil
Owner/President

Ph (305) 856-2202