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 # P98000083233 1. Corporation Name

GLOBAL MORTGAGE FINANCING CORP.

FILED Mar 03, 1999 8:00 am Secretary of State

03-03-1999 90032 020 ***150.00



Principal Place	of Business	Mailing Address			- (
		323 N.W. 36TH AVENUE DEERFIELD BEACH FL 33442			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
		A 14-77 A 4-14-7-			09/25/1998 4. FEI Number Applied For
2. Principal Pl	2a. Mailing Address			4.5.0866362 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired
		City & State			
City & State		28			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country 25	Zip 29 30	Country	<i>'</i>	8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No
24 25 29 30 9. Name and Address of Current Registered Agent			'		10. Name and Address of New Registered Agent
9. Name and Address of Current Neglectics Agent				Name /	00
CLARK, COREY				X/L	esd (P.O. Box Number is Not Acceptable)
323 N.W. 36TH AVENUE			82	320	20 n. Military Paul # 200
DEERFIELD BEACH FL 33442			83		- , , , , ,
			84	City	1 Paton FL 85 393431
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation					oration submits this statement for the purpose of changing its registered
office or registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the abovernance of points and the state of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
	in ramiliar with, and accept the obligation	-1	a Otatotes		2-4-19
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable (NOTE: Re	gistered Age	nt signature required	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE	1	heredent Change Dadition
NAME	CLARK, COREY	•	1.2 NAME		3200 n. military hail #200
STREET ADDRESS	323 N.W. 36TH AVENUE			ADDRESS ./	2002 A PA +00 H 33/21
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	☐ DELETE	14 CITY-5	ST-ZIP 1	Change Addition
TITLE			2.1 TITLE 2.2 NAME		
NAME				T ADDRESS	
STREET ADDRESS			2.4 CITY-		
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE	31-21	☐ Change ☐ Addition
NAME		_	3.2 NAME		1
STREET ADDRESS			3.3 STREE	ET ADDRESS	· · · · · · · · · · · · · · · · · · ·
CITY-ST-ZIP			3 4. CITY-	ST-ZIP	
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME	:	
STREET ADDRESS			4.3 STREE	ET ADDRESS	
CITY-ST-ZIP			4.4 CITY-5	ST- ZIP	
TITLE		☐ DELETE	5.1 TITLE		· Change · Addition
NAME			5.2 NAME		
STREET ADDRESS			1	ET ADDRESS	
CITY-ST-ZIP		☐ DELETE	5.4 CITY-S 6.1 TITLE	51-ZIP	☐ Change ☐ Addition
TITLE		C pereic	6.2 NAME		C serings C requisit
NAME				ET ADDRESS	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

2-4-49 . 521-497-5-700