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 # P98000090793

1. Corporation Name

REAL ESTATE MORTGAGES INTERNATIONAL CORPORATION

Principal Place of Business

Mailing Address

7390-SAND-LAKE-RD, SUITE-350 ORLANDO FL 32819

P O BOX 1311 ORLANDO FL 32802-1311

2a. Mailing Address

Suite, Apt. #, etc.

City & State

26

27

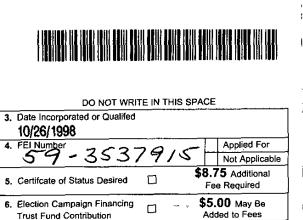
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Zip

FILED Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90085 025 ***150.00



THURDEKOOS, CARLOS 7380 SAND LAKE RD, SUITE 350 ORLANDO FL 32819 --

Country

USA

9. Name and Address of Current Registered Agent

2. Principal Place of Business 21 76/6 SOUTH/ANS Blud

100

	Personal Property Tax.	☐ Yes ZHNo
	10. Name and Address of New	Registered Agent
81	Name	
82	Street Address (P.O. Box Number is Not Accept 2016 SOUTG / A.W.	otable) Blud
83	SUITE 100	
84	City ON/ANDO	FL 85 Zip Code 3 2 80 9

This corporation owes the current year Intangible

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in 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.

Country

30

SIGNATURE (NOTE: Penistered Aced signature (solidary) DATE					
Signature, typed of prince name or registered agent and use it applicable.					
12	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OPPICERS AND DIRECTORS IN 12		
TITLE	D DELETE	1.1 TITLE	<i>f</i> 1		
NAME	THURDEKOOS, CARLOS	1.2 NAME	7616 SOUTHIAND BIND, Suite 100 ONIAND FC 32809		
STREET ADDRESS	7 380 SAND LAKE RD, SUITE 350	1.3 STREET ADDRESS	7616 SOUTH AMS 15106, VOIL		
CITY-ST-ZIP	ORLANDO-FL-32819	1.4 CITY-ST-ZIP	ONIAND IT SZOUT		
TITLE	D DELETE	Z.1 IIILE			
NAME	THURDEKOOS, MARIA	2.2 NAME	7616 SOUTGIANA, BIND, SUITEIDO DUIANAD, FL 32809		
STREET ADDRESS	7 380 SAND LAKE RD, SUITE 35 0	2.3 STREET ADDRESS	7616 50014/8/00, 13:00		
CITY-ST-ZIP	ORLANDO FL 32819	2. 4 CITY-ST-ZIP	DULARAD, PL 32801		
TITLE	. □ DELETE	3.1 TITLE	☐ Change ☐ Addition		
NAME	ا تامید دار و و^{ی م} ایاسید به پیشویه پایا دیمونی د	3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CITY-ST-ZIP		3.4, CITY-ST-ZIP			
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition		
NAME		4. 2 NAME			
STREET ADDRESS	•	4.3 STREET ADDRESS			
CITY-ST-ZIP	2 1 2 20 22 25 41	4.4 CITY-ST-ZIP			
TITLE	CONTROL OF	5.1 TITLE	☐ Change ☐ Addition		
NAME	ing Administration of the Control of	5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS	` {		
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	DELETE	6.1 TITLE	Change Addition		
NAME	•	6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS			
CITY-ST-ZIP		6.4 CITY-ST-ZIP			
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 at 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 ith an address, with all other like empowered. Block 12 or Block

SIGNATURE

4078160087

No No