

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000095548

1. Entity Name

V & V MORTGAGE, INC.

**FILED**  
**Apr 14, 2000 8:00 am**  
**Secretary of State**

04-14-2000 90036 001 \*\*\*300.00

Principal Place of Business

Mailing Address

11728 SW 107 LANE  
MIAMI FL 33186

11410 NORTH KENDALL DRIVE #306  
MIAMI FL 33176-1031

2. Principal Place of Business

3. Mailing Address

11410 KENDALL DRIVE

11410 KENDALL DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

106

106

City & State

MIAMI FL.

City & State

MIAMI FL.

Zip

33176

Country

USA

Zip

33176

Country

USA

4. FEI Number

65-0875733

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

SAAVEDRA, ESQ, DAMASO W  
312 SW 17TH ST  
FT LAUDERDALE FL 33316

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

☐

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Delete  
NAME VASQUEZ, GABRIEL  
STREET ADDRESS 11728 SW 107 LANE  
CITY-ST-ZIP MIAMI FL 33186

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VPD ☐ Delete  
NAME FLORIT, SR, LUIS  
STREET ADDRESS 5445 SW 150TH PL  
CITY-ST-ZIP MIAMI FL 33185

TITLE P/S/T ☒ Change ☐ Addition  
NAME FLORIT-MOLINA, LUIS HECTOR  
STREET ADDRESS  
CITY-ST-ZIP 11410 Kendall Dr. #106 Miami, FL 33176

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 officers or directors.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LUIS FLORIT, SR., PRESIDENT 04/05/00

Date

Daytime Phone #

CR2E034 (9/99)