

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000001626

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: ANC MORTGAGE INC.

Current Principal Place of Business:

12350 SW 132 CT
SUITE 101
MIAMI, FL 33183

New Principal Place of Business:

Current Mailing Address:

12350 SW 132 CT
SUITE 101
MIAMI, FL 33183

New Mailing Address:

FEI Number: 65-0885439

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TORRES, ARMANDO O
6135 SW 129 PL
SUITE 1903
MIAMI, FL 33183 US

Name and Address of New Registered Agent:

TORRES, ARMANDO O
7671 SW 133 AVE
MIAMI, FL 33183 US

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: ARMANDO O. TORRES

04/30/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TORRES, ARMANDO O
Address: 6135 SW 129 PL SUITE 1903
City-St-Zip: MIAMI, FL 33183

Title: VP () Delete
Name: CARRERA, NIVIA M
Address: 13304 SW 73 TE
City-St-Zip: MIAMI, FL 33183

Title: VPS () Delete
Name: DOMINGUEZ, RENO
Address: 3614 MONSERRATE
City-St-Zip: CORAL GABLES, FL 33134

Title: VPT () Delete
Name: TORRES, VALERIA S
Address: 6135 SW 129 PL SUITE 1903
City-St-Zip: MIAMI, FL 33183

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: TORRES, ARMANDO O
Address: 7671 SW 133 AVE
City-St-Zip: MIAMI, FL 33183

Title: VPT (X) Change () Addition
Name: CARRERA, NIVIA M
Address: 13304 SW 73 TE
City-St-Zip: MIAMI, FL 33183

Title: PRES (X) Change () Addition
Name: DOMINGUEZ, RENE
Address: 3614 MONSERRATE
City-St-Zip: CORAL GABLES, FL 33134

Title: VP (X) Change () Addition
Name: TORRES, VALERIA S
Address: 7671 SW 133 AVE
City-St-Zip: MIAMI, FL 33183

Title: S () Change (X) Addition
Name: MEDINA, BARBARA MS.
Address: 2623 NW 24 ST #4
City-St-Zip: MIAMI, FL 33142

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ARMANDO O. TORRES

D

04/30/2002

Electronic Signature of Signing Officer or Director

Date