

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000019336

1. Entity Name

CENTRAL MORTGAGE LENDERS, INC.

FILED

May 04, 2000 8:00 am
Secretary of State

05-04-2000 90157 019 ***150.00

Principal Place of Business

1125 NORTHEAST 125TH STREET
SUITE 400
NORTH MIAMI FL 33161

Mailing Address

1125 NORTHEAST 125TH STREET
SUITE 400
NORTH MIAMI FL 33161-5014

2. Principal Place of Business

1125 N.E. 125th ST.

Suite, Apt. #, etc.

200

3. Mailing Address

1125 N.E. 125th ST

Suite, Apt. #, etc.

200

City & State

NORTH MIAMI, FL

City & State

NORTH MIAMI, FL

Zip

33161

Country

U.S.A.

Zip

33161

Country

U.S.A.

4. FEI Number

65-0998077

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

KARINE DUVERGER

Street Address (P.O. Box Number is Not Acceptable)

21623 SW 90th AVENUE

City

MIAMI

FL

Zip Code

33189

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 Karine Duverger KARINE DUVERGER PRESIDENT 4/27/00

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PSTD
PEAN, MAXITO K
1125 NORTHEAST 125TH STREET
NORTH MIAMI FL 33161 ☐ Delete

TITLE
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CITY - ST - ZIP
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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PRESIDENT
KARINE DUVERGER
21623 SW 90th AVENUE
MIAMI, FL 33189 ☒ Change ☐ Addition

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

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

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: KARINE DUVERGER KARINE DUVERGER 4/27/00 (205) 892-2654

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)