

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2001 08:00 AM
Secretary of State

DOCUMENT # P99000022636

1. Entity Name
CITIWIDE MORTGAGE AND INVESTMENTS CORP.

Principal Place of Business
20335 WEST COUNTRY CLUB DRIVE
SUITE 23.09
AVENTURA FL 33180

Mailing Address
20335 WEST COUNTRY CLUB DRIVE
SUITE 23.09
AVENTURA FL 33180

2. Principal Place of Business
20335 WEST COUNTRY CLUB DRIVE

3. Mailing Address
20335 WEST COUNTRY CLUB DRIVE

Suite, Apt. #, etc.
SUITE 2309

Suite, Apt. #, etc.
SUITE 2309

City & State
AVENTURA FL

City & State
AVENTURA FL

Zip
33180

Zip
33180

4. FEI Number
65-0901988

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

SAR-SHALOM EZEQUIEL
20335 WEST COUNTRY CLUB DRIVE
SUITE 23.09
AVENTURA FL 33180

7. Name and Address of New Registered Agent

Name
SAR-SHALOM EZEQUIEL
Street Address (P.O. Box Number is Not Acceptable)
20335 WEST COUNTRY CLUB DRIVE
SUITE 2309
City
AVENTURA FL Zip Code
33180

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 _____ DATE 04/30/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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	D	NAME	STREET ADDRESS	CITY-ST-ZIP	FL	33180	Delete
		SAR-SHALOM EZEQUIEL	20335 WEST COUNTRY CLUB DRIVE	AVENTURA	FL	33180	<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>
							<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Ezequiel Sar-Shalom

D

04/30/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)