


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 08:00 AM
Secretary of State

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| DOCUMENT # P99000055985 |  |
| 1. Entity Name KENDALE MORTGAGE & FINANCE, CORP. | |

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|---|---|
| Principal Place of Business 9010 SW 137TH AVENUE SUITE 105-107 MIAMI, FL 33186 | Mailing Address 9010 SW 137TH AVENUE SUITE 105-107 MIAMI, FL 33186 |
|---|---|

DO NOT WRITE IN THIS SPACE



04232004 No Chg-P CR2E034 (10/03)

| | |
|--|-------------------------------|
| 4. FEI Number NOT APPLICABLE | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

TORRES-ZAMBRANA, ANA V
9010 SW 137TH AVE
SUITE 105-107
MIAMI, FL 33186

DO NOT WRITE
IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

| | | |
|---|---|--|
| FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
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10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PTVP TORRES-ZAMBRANA, ANA V 9010 SW 137TH AVE, STE 105-107 MIAMI, FL 33186 |
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U000000132804
04/27/04-80061-022 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:  4-23-04 (305)383-1011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone #