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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # \$41312

(7)

REAL ESTATE & MORTGAGE SOLUTIONS, INC.

Di i IB			A							
Principal Place	failing Address							• • • • • • • • • • • • • • • • •		
6248 FRANCIS ST. PALM BEACH GARDENS FL 33418			6248 Francis St. Palm Beach Gardens FL 33418							
							3. Date incorporated or Qualified 03/28/1991	1	of Last R	-
2. Principal Pla	ace of Business	2a	ı. Mai'ıng Address				4. FEI Number	. , , , , , , , , , , , , , , , , , , ,		Applied For
21			6)							Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	X		Additional Required
City & State			Oty & State				6. Election Campaign Financing	<u></u>		May Be
23		28					Trust Fund Contribution			d to Fees
Zip	Country		Zp	Cou	untry		8. This corporation has liability for in		x under s	199.032,
24	25	29		30	r		Florida Statutes Yes			
	9. Name and Address of Curre	ent Regi	stered Agent		81	Name	10. Name and Address of New Ro	egistered	Agent	
O41 **	JEECOEN D									
CALER, JEFFREY R. 6248 FRANCIS ST. PALM BEACH GARDENS FL 33418						Street Add	dress (P.O. Box Number is Not Acceptable)			
				83		MAR. 201 NOTES - 100 - 1				
FALMIDI	CHOIT WHILLIAN I C 00410								las Y =	- C-d-
					84	City		FL	85 Zq	p Code
SIGNATURE _	Sgrabze, typed or protest name of represent ago OFFICERS A		CTORS	еле верхан 13 .		d'aigrafille teitiff	ADDITIONS/CHANGES TO OFF			
TITLE	PCE0		DELEJE	1.1	HILF				Change	Addition
NAME	CALER, JEFFREY R				AME					
STREET ADDRESS	6248 FRANCIS ST.	00440				LADDRESS				
CHY-ST-ZIP	PALM BEACH GARDENS FI	. 33418	DELETE	140		ST - ZIF		г	Change	☐ Addition
TITLE NAME			□ виси		AME			L		L Addition
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP						ST-ZIP				
TITLE			DECETE	** -**	TITLE			[Charige	Addition
NAME				321	IAME					
STREET ADDRESS				33	STREE	1 ADORESS				
CITY-ST-2-P			· · · · · · · · · · · · · · · · · · ·			ST - ZIP		-		
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NAME					NAME					
STREET ADDRESS	}			1		1 ADDRESS				
CITY-ST-Z:P			☐ DELETE		CITY - S TITLE	ST · ZIP			Change	Maddition
TITLE			Присти		NAME			'	Onlings	LI NOOMO!
NAME CTREET APPROPRIE						LADORESS				
STREET ADDRESS						ST-Z/P				
CITY-ST-ZIP THLE			DELETE		TIFLE				Change	Addition
NAME			<u> </u>		LEA LAC					_

14. I do hereby certify that the information supplied with this fring is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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 12 or Block 13 if changed, or on an attachment with an address

6.3 STREET ADDRESS

SIGNATURE

STREET ADDRESS

HATTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR R. CALER

5/9/96 Dayrine Phane #