FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

77

FILED
Apr 24 1998 8:00am
Secretary of State

1. Corporation	COT MORTGAGE COMPANY	` '					8), 8(8), 848), 888 8), 818), 818), 818
Principal Plac	e of Business	Mailing Address				**	*** *****
780 N.W. 4		780 N.W. 42 AVE.					
SUITE 418 MIAMI FL 33126		SUITE 418 Miami Fl 33126		DO NOT WRITE IN THIS SPACE			
Militario I E	,501EO	Missen I F 69150			3. Date Incorporated or Qualified		
					04/09/1991		1
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21 26					65-0259833		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	- -		5. Certificate of Status Desired	,	5 Additional
22 27 City & State City & State							Required
23	e e	28			6. Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip	Country		Zip Country		This corporation owes or has paid the		
24	25	29	30		Personal Property Tax due June 30.	Yes	□No
	9, Name and Address of Curren	t Registered Agent			10. Name and Address of New Register	ed Agent	
	EB QW ITZ, WALTER 8		81	Name			ŀ
	2555 BISCAYNE BLVD. #924		82	Street Ac	idress (P.O. Box Number is Not Acceptable)		
, N	AIAMI FL 33181		83				
			63				1
			84	City		EL 85 2	Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607,1508, Florida Statute	es, the above	e-named co			ng its registered
office or I	registered agent, or both, in the State	of Florida, Such change was a stiggs of Section 607,0505. Fig.	uthorized by	the corpo	orporation submits this statement for the purpos ration's board of directors. I hereby accept the	appointment	t as registered
SIGNATURE	and terminal with and accept the owner.	11013 01, 0001011 007.5500, 110	ALOG CIBICIO	,			
SIGNATURE	Signature typed or printed name of registered age	or and etc. if applicable. (NOT)	Registered Age	ent signature re	guired whon reinstating) DA1		f
12.		OFFICERS AND DIRECTORS 13.		· 1 -	ADDITIONS/CHANGES TO OFFICERS		
TITLE	PCEO VILCA, ALBERTA	DELETE	1.1 TITLE	1		L. Chan	
NAME Street address	780 NW 42 AVE., STE.418		1.2 NAME 1.3 STREET	ADDDECC			
CITY-ST-ZIP	MIAMI FL 33726		1.4 C(TY - S	- 1			
TITLE	VP	DELETE	2.1 TITLE			Chan	
NAME	ROMERO, ANDRES		22 NAME				1
STREET ADDRESS	780 NW 42 AVE.,STE. 418		2.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33726		2. 4 CITY -	ST-2IP			
TITLE	OHEOADA MADIA FIEMA	☐ DELETE	3.1 TITLE	{		∐ Chan	ge L Addition
NAME STREET ADDRESS	QUESADA, MARIA ELENA 780 NW 42 AVE.,STE. 418		3.2 NAME 3.3 STREET	ADODECC			<u> </u>
	MIAMI FL 33726		3.4. CITY-				ł
CITY-ST-ZIP	8	DELETÉ	4.1 TITLE	or-eir		Chan	ge Addition
NAME	ROMERO, MARK	_	4. 2 NAME				
STREET ADDRESS	780 NW 42 AVE.,STE. 418		4.3 STREET	ADDRESS			Ì
- CITY-ST-ZIP	MIAMI FL 33726		4.4 CITY-S	1 - ZIP			
TITLE		DELETE	5.1 TITLE			☐ Chan	ige
NAME			5.2 NAME				1
STREET ADDRESS			5.3 STREFT				\
CITY-ST-ZIP TITLE		☐ DELFTÉ	5.4 C/TY - S 6.1 TITLE	T - ZIP		Chan	ge Addition
NAME		□ vcc n	6.2 NAME	1		Land Citati	As T Women
STREET ADDRESS			6.3 STREET	AUDBESS			ļ
CITY-ST-ZIP			6.4 CITY - S				
14. I hereby	certify that the information supplied w	ith this filing does not qualify fo	or the exemp	tion stated	in Section 119.07(3)(i), Florida Statutes. I furthe	r certify that	the information

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am at officer or director of the corporation or the receiver or trustee employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charging of on an attact/ment with an address.

SIGNATURE: