## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Feb 10, 2000 8:00 am DOCUMENT # **S72809** 1. Entity Name Secretary of State COUNTY TRUST MORTGAGE BANKERS CORP. 02-10-2000 90058 030 \*\*\*158.75 Principal Place of Business Mailing Address 11430 N KENDALL DR 11430 N KENDALL DR SUITE 300 SUITE 300 MIAMI FL 33176-1041 MIAMI FL 33176 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State · City & State 4. FEI Number 65-0276605 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required> --7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CHOMAT, HECTOR Street Address (P.O. Box Number is Not Acceptable) 11430 N. KENDALL DRIVE SUITE 300 **MIAMI FL 33176** Zip Code FL 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 . Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. Chomat, Hector TITLE ☐ Delete TITLE CHOMAT, HECTOR NAME NAME 11430 N' Icendal Prive, A 300 11430 N. KENDALL DRIVE #300 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL ☐ Addition ☐ Delete TITLE Chomat Elsa M. Chomat Elsa M. 11430 N Kentall Drive #300 TITLE CHOMAT, ELSA M NAME NAME STREET ADDRESS C/O 11430 N. KENDALL DR. STREET ADDRESS Minmi, FC 33176 CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33176 Addition TITLE ☐ Delete TITLE THURSO N Kerdall Prive #300 ITURRIOZ, VIRGINIA NAME NAME STREET ADDRESS STREET ADDRESS 11430 N. KENDALL DR., #300 CITY-ST-ZIP CITY-ST-ZIP Minni FL 33176 MIAMI FL ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 a courate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted empowered to be provided by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

Hector Chonal President