SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V21068

MORTGAGE MIRACLES, INC.

Mailing Address

1797 JUL 22 PH 3: 111 SECRETARY OF STATE TALLAMASSEE, FLORIDA

AFFROVED

|--|

2100 CONSTITUTION BLVD. SARASOTA FL 34231			1259 RIEGEL'S LANDING DRIVE Siesta key fl 34242 Us			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report			
						3. Date Incorporated or Qualified			∌port
2. Principal Pla	ace of Business	2a. Mailing Address	2n Mailing Address			03/13/1992 4. FEI Number	02/27	/1996	
									plied For
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.						65-0319590			t Applicable
22	27				5. Certificate of Status Desired		8.75 A Fee Red		
City & State City & State						6. Election Campaign Financing			····
23		28				Trust Fund Contribution		\$5.00 i Added to	
Zip	Country	Zip	Co	untry	·	8. This corporation owes or has pa			
24	25	29	30			Personal Property Tax due June] No
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Re		nl	
Valdini, Frank A. 1259 Rie gel's Landing dr				81	Name				
				82	Street Ado	dress (P.O. Box Number is Not Acceptab	lo)		
SIES	TA KEY FL 34242				olicei Aut	areaa (r.e. box redifiber is not Acceptab	ic)		
				В3			····		
				1					
				84	City		FL ⁸	5 Zip C	ode
agent. I am SIGNATURE	familiar with, and accept the obli ignature typed or printed name of registered a	gations of, Section 607.0505,	Florida Sta	itutes	3.	ation's board of directors, t hereby acception will be acception of directors and the property acception of the property acception of the property acception of the property acceptance and the proper	DATE		
12.	OFFICERS A	ND DIRECTORS	13.		***************************************	ADDITIONS/CHANGES TO OFFIC		RECTORS	3 IN 12
TITLE	D	DELETE	1.1 T	ITLE				Change	Addition
NAME	VALDINI, FRANK A.		1.2 N	IAME		90000224		<u> </u>	4
STREET ADDRESS	1259 RIEGEL'S LANDING DE	₹	1.3		ADDRESS	9000022 -07/24/9	7011	4∩	12
CITY-ST-ZIP	SIESTA KEY FL		1.4 0	:ITY - S	1 - 21P	****165		***169	5 00
TITLE		DELETE	2.1 T	17tE		67.4.5.1UJ		Change	Addition
NAME			2.2 N	IAME					
STREET ADDRESS			235	TREET	ADDRESS				
CITY-ST-ZIP			2.40	CITY-S	51 - ZIP				
TITLE		☐ DELETE	3.1 T	TLE				Change	Addition
NAME			3.2 N	AMF					
STREET ADDRESS			3.3 S	TREET	ADDRESS				
CITY-ST-ZIP			3.4. (CHIY-S	ST - ZIP				
TITLE		☐ DELLTE	4.1 1	ALE				Change	Addition
NAME			4.21	NAME					
STREET ANDRESS			4.3 S	TREET	ADDRESS				
CITY-ST-			4.4 C	HY-\$1	1-7IP				
TITLE		☐ DELETE	5.1 71					Change	Addition
NAME			52N	AME.					
STREET ADDRESS			5.3 S	TREET	ADDRESS				
CITY-ST-ZIP				IIY-SI	1 - ZIP				
TITLE		☐ DELETE	6.1 11					Change	Addition
NAME			62 N	AM[•	100%	\mathcal{P}
STREET ADDRESS			635	TREET	ADDRESS			10	, ·
CITY-ST-ZIP									

pg20/2

MORTGAGE MIRACLES, INC. LICENSED MORTGAGE LENDER

To: Div. of Corporations Annual Reports Section

July 18, 1997

To Whom It May Concern:

Enclosed herewith please find my check in the amount of \$165.00 as the required annual report fee due for my corporation. We are sending this to you with the "2nd notice" for the annual report (which we received today). Please note, however, that we never received the first notice which called for filing last month. Had we received that notice, we would have filed and sent the required fee in promptly as we have always done in the past. Thank you for your attention in this matter.

Sincerely,

Frank A. Valdini, Pres.

Mortgage Miracles, Inc.



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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

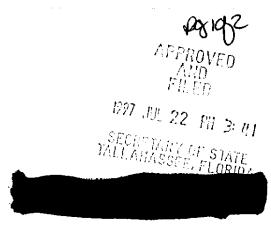
Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000079012 (7)

JUNIOR COTILLION - THE COTILLION, INC.



Principal Plac	ce at Business	Mailing Address			
40 COUNTRY		40 COUNTRY CLUB RD.	_		
SHALIMAR FL	32579	SHALIMAR FL 32579-180	6		
				3. Date incorporated or Qualified	3a. Date of Last Report
				10/16/1995	10/21/1996
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied for
21		26		NOT APPLICABLE	Not Applicate
Suite Apt.	. #. etc	Suite Apt #, etc			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	, Country	Z.p	Country	8. This corporation has liability for i	_ ,
24	25	29	30		Yes No
	9. Name and Address of Cui	rrent Registered Agent		10. Name and Address of New Re	gistered Agent
	NOLD, ROBERT J		81 Name		
i	COUNTRY CLUB RD.		82 Street Ac	idress (P.O. Box Number is Not Acceptab	ter)
SHA	ALIMAR FL 32579				
			83		
			84 0.17		85 Zo Code
<u> </u>					FLII
office or i	regi ste red adest or both in the SI	tate of Fiorida. Such change was	authorizon by the corpo	orporation submits this statement for the pration's board of directors. Thereby accept	urpose of changing its registered. If the appointment as registered.
ľ	nni f am uar with land accept the of	oligacions or, section our dods, r	ronda Statutes		:
SIGNATURE	Suprange (1.10) (1.10) in tegral (4.10)	distributed the Chipper time. U.C	Pis. Best-beres Aport op at er er	Such a when such state as	33-417
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1 1 1 LE		Change Addition
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CITY - ST - ZIP	SHALIMAR FL 32579		14 OIEV (31-34P)	赤赤赤 1 b 3	.00 ****165.00
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NAME	ARNOLD, ROBERT J		22 NAME		:
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HAME-			3.2 NAME		
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CIT++ST-ZIP					
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		☐ DECLITE			Change Adoition
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		☐ DELLTE	4 1 DTGE 4 2 NAME 4 3 STPEET ADDRESS		Change Addition
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CITY - STICIP TITLE NAME STREET ABURESS CITY - STI-ZIP TITLE NAME		DELETE	4 1 LITE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY-ST-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-ST-ZIP 6 1 TITLE 6 2 NAME		

4. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect usefunded 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 13 if changing on an attrachment with an address.

SIGNATURE:

Let asself

18 apr 97 850-882-4426

16 July 97

Devesion og Corporations P.O. Boy 6327 Tallahoner, FC 323/4

Occording to my checkbook, my check for Junior Cotillen has not been cashed!

This concerns me. Occordingly, attached is a photo copy of the file document from my records and another check.

Lespertfully, (Bot assold, for Jeenen Cotillion: 40 Coventry Club 40 Shalemai, FC 32579