SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name

(6)

MISSION MORTGAGE CORPORATION

FILED

Sep 09 1998 8:00am

Secretary of State

Fillipai Flac	e or bus iness	Mailing Address			
6151 MIRAMAR SUITE 318 MIRAMAR FL 33 US		6151 MIRAMAR PKWY. SUITE 318 MIRAMAR FL 33023 US		DO NOT WRITE IN TO	HIS \$PA CE
				07/17/1992	
2. Principal P	iace of Business	2a. Mailing Address		4. FEI Number	Applied For
216151	HIRAMAR PARKWAY	26 6151 MIRA	war PKI	ω (65-0346591	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-1		\$8.75 Additional
22 SUN		27 SUITE 3 City & State	18		Fee Required
City & State	AMAR FLORIN	A		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 33 0	23 Beau ARD	Zip 29 33023 31	Country BRW	8. This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible
	9. Name and Address of Current R	10. Name and Address of New Register	10. Name and Address of New Registered Agent		
RUS	H, C HE RYL	TE LONDAG T TAT			
	MIRAMAR PKWY.		TEWODROS T. TAZAZ		
			Street Address (P.O. Box Number is Not Acceptable)		
++11=+14					·
MIKA	MAR FL 33023		ँ ६७	NTE 318	
			84 City	TIRAMAR F	L 85 Zip Code 33023
11. Pursuant to the provisions of sections 607.0502 and 601.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of section 607.0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicance (NOTE: Registered Agent signature required when reinstating) DATE Output DATE					
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	MAR PRESIDENT	DELETE	1.1 TITLE	PP PRESIDENT	Change Addition
NAME	TAZAZ, TEWODROS	C. J OCCCIO	1.2 NAME	TAZAZ, TEWODEOS	
STREET ADDRESS	AARA AMPARIAN NANIMIANA OLIMPI AAA		1.3 STREET ADDRESS	6151 HIRAMAR PARK	WAY SUITESIN
	MIRAMAR FL 33023	510	1.4 CITY-ST-ZIP	MIRAMAR, FL. 331	228
CITY-ST-ZIP TITLE	MINERALL L 33023	Document	2.1 TITLE	J.P	
		L DELETE		· •	Change Addition
NAME			2.2 NAME	AVA RUSH	MIESTERS MAN
STREET ADDRESS			2.3 STREET ADDRESS	GIST MIRAMAR PARKU	That so et a sin
CITY-ST-ZIP			2.4 CITY-ST-ZIP	HIRAMAR PL 3302	>_
TITLE		L DELETE	3.1 TITLE		L Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	_		4,4 CITY-ST-ZIP		
TITLÉ		DELETE	5.1 TITLE		Change Addition
NAME		* *	5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		CHONGO [] MOVING
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby ce	ertify that the information specified with this	Miling does not qualify for the	exemption stated in	section 119.07(3)(i), Florida Statutes. I further certi	ify that the information
indicated of an officer of in Block 12	on this annual report or supplemental app or director of the corporation or the receive or Block 13 if changed, or on an attach	iual report is true and accurate rer or trustee empowered to e ment with an address.	e and that my signa xecute this report a	ture shall have the same legal effect as if made ur s required by Chapter 607, Florida Statutes; and th	nder oath; that I am nat my name appears