## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT CORPORATION** ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #
1. Corporation Name

SIGNATURE:

V60873

(9)

MORT	GAGE BROKERS INCORF	PORATED							
Principal Place	of Business	Mailing Address				1 18871 QIADID 87111 80001 70171 79	PPO IIII BIBAI BIBI	A BIBIN BEBIN BIBIF BABAI	
100 RIALTO SUITE 750 MELBOURN		100 RIALTO PLACE SUITE 750 MELBOURNE FL 32934							
US		U\$				3. Date Incorporated or Qualified 08/31/1992	į.	of Last Report 5/01/1995	
2. Principal Pla	ace of Business	2a. Mailing Address	<u> </u>			4. FEI Number		Applied For	
21 Suite Ant 4	+ oto	26 Suite Apt 4 ate	Suite, Apt. #, etc.			59-3142652 Not Applicable			
Suite, Apt. #, etc.		27	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required	al .
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip <b>24</b>	Country 25	Z <sub>I</sub> p <b>29</b>	Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ▼No			
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New F	Registered Ag	jent	
			B1	Nam	e				
WRIGH 2808 K	T, B.J. Ingdom avenue		82	Stree	t Address	s (P.O. Box Number is Not Acceptat	ole)		
	URNE FL 32934		83						
			84	City			FL	85 Zip Code	
or registere	o the provisions of Sections 607.050 ed agent, or both, in the State of Flo h, and accept the obligations of, Sec	rida. Such change was authorize	s, the above- ed by the corp	named oration	corporati 's board (	on submits this statement for the pu of directors. I hereby accept the app	rpose of chang ointment as re	ging its registered o gistered agent. I ar	office m
SIGNATURE									
12.	Signature typed or printed name of registered age OFFICERS At	ND DIRECTORS	E Registered Ager	nt Bignatur	e required wi	hen reinstating! ADDITIONS/CHANGES TO OFF	DATE	NDECTORS IN 12	
TITLE	PSD	DELETE	1. 1 ?ITLE 1.2 NAME			ADDITIONS/CHANGES TO OFF		Change Addition	on
NAME	WRIGHT, B.J.	_						•	
STREET ADDRESS	2808 KINGDOM AVENUE		1.3 STREET	1.3 STREET ADDRESS					
CITY-ST-ZIP	MELBOURNE FL 32934		1.4 CITY-5	T-ZIP					
TITLE	VD	☐ DELETE	2 1 TITLE					Change Additi	on
NAME	wright, glenn e		22 NAME						
STREET ADDRESS	14 TIMBER TOP DR		23 STREET	ADDRESS	S				
CITY-ST-2IP	WOODLANDS TX 77380	- Dritte		2 4 CiTY-ST-ZIP					
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CITY-\$T-ZIP TITLE		☐ DELETE	3.4 CITY - 5 4. 1 TITLE	1 - ZIP	+			Change Addition	on :
NAME			4.2 NAME					onenge Notice	371
STREET ADDRESS			4.3 STREET	ADDRESS					
CITY-ST-ZIP			4.4 CITY - S						
TITLE		☐ DELETE	5. 1 TITLE		1			Change	
NAME			5.2 NAME					_	
STREET ADDRESS			5.3 STREET	ADDRESS	s				
CITY-ST-ZIP			5.4 CITY - S	T-ZIP					
TITLE		[] DELETE	6 1 TITLE					Change Addition	on
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET	ADDRESS	3				
CITY - ST - ZIP	- 15 At - 1 Ib - 1 A		64 CITY S		_ <u></u>	· · · · · · · · · · · · · · · · · · ·			
certify that oath; that I	the information indicated on this and	nual report or supplemental annu oration or the receiver or <b>trust</b> ee	al report is tru empowered :	ie and :	accurate :	the exemption stated in Section 119 and that my signature shall have the eport as required by Chapter 607, FI	tane lengt off	lant se if made und	lor

B. J. WA 16 H+ 0/5/0 - 4/25/96 407-722-26/0