

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L12663

FILED
Jan 27, 2003
Secretary of State

Entity Name: T.A.B. MORTGAGE CORP

Current Principal Place of Business:

3425 W. OAKLAND PARK BLVD.
LAUDERDALE LAKES, FL 33311

New Principal Place of Business:

Current Mailing Address:

PO BOX 9724
FORT LAUDERDALE, FL 33310

New Mailing Address:

PO BOX 9102
FORT LAUDERDALE, FL 33310

FEI Number: 65-0137670

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, ADELHEIDE S.W.
3620 NW 28 STREET
LAUDERDALE LAKES, FL 33311 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: DIXON, ADELHEIDE S.W., .
Address: 3620 NW 28TH STREET
City-St-Zip: FORT LAUDERDALE, FL 33311

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 accurate and that my electronic signature shall have the same legal effect as if made 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADELHEIDE S.W. DIXON

CEO

01/27/2003

Electronic Signature of Signing Officer or Director

_____ Date