2000 UNIFORM BUSINESS REPORT (UBR)

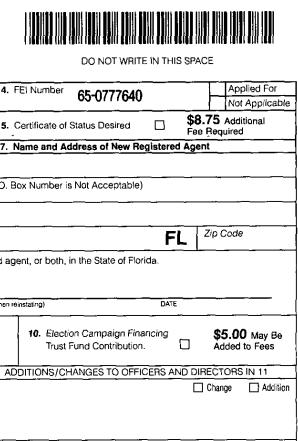
DOCUMENT # **F97000003595**

ACTION HOME BUYERS, INC.

Principal Place of Business Mailing Address PO BOX 718 III SE COMMERCE AVE ----- FL 34999 STUART FL 34995-0718 2. Principal Place of Business 3. Mailing Address

FILED May 05, 2000 8:00 am Secretary of State

05-05-2000 90005 003 ***150.00



Suite, Apt.	#, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State			City & State			4. FEI Number 65-0777640					<u> </u>	olied For Applicable
Zip Country Zip Cou					itry	5. (3.75 Additional e Required		
	6. Name	and Address of Current R	egistered Agent			7. 1	lame and Ac	dress of New F	Registere	d Age	nt	
					Name							-
WOL 200-/ TALL		Street Address (P.O. Box Number is Not Acceptable)										
11100		City FL Zip Code							•			
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o. The above	e named entity	y submits this statement for	the barbose of changing	its register	ed office of te	gistered ag	GIR, OF DORIN	ir tric otate or i i	Jilug.			
SIGNATURE ,	Cionatura hipad	or printed name of registered agent an	d title if anningable (Ni	OTE: Bagistere	d Agent signature r	equired when re	instating)		DAT	F		
	Signature, typeo	or printed name of registered agent an	d tille il applicable. (14	OTE. Hagistela	a Agent aignature i	aquiled whom te	mstating/					
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!! After MAY 1, 200 Make Check Payabl					will be \$550			on Campaign Fil Fund Contributio				May Be to Fees
11.		OFFICERS AND D	RECTORS	12.		AD	DITIONS/CH	ANGES TO OFF	ICERS A	ND D	RECTORS	IN 11
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indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.