

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

FILED
May 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000004101 (8)
 1. Corporation Name
FLATIRON CREDIT COMPANY, INC.



Principal Place of Business 1801 CALIFORNIA ST., #3920 DENVER CO 80202	Mailing Address 1801 CALIFORNIA ST., #3920 DENVER CO 80202
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 600 17th Street Suite, Apt. #, etc. 22 Ste 1900S City & State 23 Denver CO Zip 24 80202	2a. Mailing Address 26 600 17th Street Suite, Apt. #, etc. 27 Ste 1900S City & State 28 Denver CO Zip 29 80202
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3. Date Incorporated or Qualified 08/04/1997	4. FEI Number 84-1421362 APPLIED FOR	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOPER, THOMAS A	1.2 NAME	
STREET ADDRESS	1291 LAUREL CT.	1.3 STREET ADDRESS	
CITY-ST-ZIP	MARCO ISLAND FL 34145	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEE, KEWSONG	2.2 NAME	
STREET ADDRESS	488 LEXINGTON AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10017	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NEWMAN, HOWARD H	3.2 NAME	
STREET ADDRESS	488 LEXINGTON AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10017	3.4 CITY-ST-ZIP	
TITLE	DCEO	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PINKERTON, ROBERT A	4.2 NAME	
STREET ADDRESS	1801 CALIFORNIA ST., #3920	4.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER CO 80224	4.4 CITY-ST-ZIP	
TITLE	PVD	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUNDY, BRUCE I	5.2 NAME	
STREET ADDRESS	1801 CALIFORNIA ST., #3920	5.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER CO 80224	5.4 CITY-ST-ZIP	
TITLE	DC	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SMITH, DAVID C	6.2 NAME	
STREET ADDRESS	1801 CALIFORNIA ST., #3920	6.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER CO 80224	6.4 CITY-ST-ZIP	

Director President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Secretary, Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Kathleen A. McCarty	
600 17th Street, Suite 1900S	
Denver, CO 80202	

14. I 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE *Valerie D. Miller* 4/29/98 303-571-1711

CR2E034 (10/97)