

**2<sup>nd</sup> and FINAL NOTICE:** File on or before Sept. 29, 1999 or Limited Liability Company will be dissolved.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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FILED  
 SECRETARY OF STATE  
 DIVISION OF CORPORATIONS  
 99 JUL 13 PM 1:46

<b>FILING FEE</b> \$ 588.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>
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1. Name and Mailing Address of Limited Liability Company	<b>DOCUMENT #</b> L98000000772
AIBC INTERNATIONAL MORTGAGE FINANCE, L.C. 80 S.W. 8TH STREET, MAIN LOBBY MIAMI FL 33130	

1a. Principal Place of Business Address
80 S.W. 8TH STREET, MAIN LOB MIAMI FL 33130

2. Principal Place of Business	2a. Mailing Address
80 SW 8th Street	80 SW 8th Street
Suite, Apt. #, etc. Lobby Level	Suite, Apt. #, etc. Lobby Level
City & State Miami, FL	City & State Miami, FL
Zip 33130	Country USA

3. Date Organized or Qualified	3a. State of Formation
06/11/1998	FL
4. FEI Number 65-0842618	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Date of Last Report	6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>

7. Name and Address of Current Registered Agent
COLOMA, VIVIAN M 80 S.W. 8TH STREET, MAIN LOBBY MIAMI FL 33130

8. Name and Address of New Registered Agent/Office	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
Suite, Apt. #, etc.	
City	Zip Code
FL	

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE \_\_\_\_\_ (Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	BURDETTE, WILLIAM R	80 SW 8TH STREET, SUITE 100	MIAMI FL
			06/04/99-90009-032 \$550.00

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (j), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

**SIGNATURE:**  July 12, 1999 305-539-3733

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER      Date      Daytime Phone #