

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P01000114062*

1. Entity Name
AMB Home Loans, Inc

980319

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
400 Summit Ridge Place

3. Mailing Address
Same

City & State
Longwood, FL 32779

City & State
Longwood, FL 32779

4. FEI Number
58-266-4664

Applicable For
Not Applicable

Zip
32779

Country
Seminole

Zip
32779

Country
Seminole

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
John E. Bottoms, Jr
Street Address (P.O. Box Number is Not Acceptable)
400 Summit Ridge Place # 200

City
Longwood FL *32779*

8. 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
John E. Bottoms, Jr. President

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1 Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

FILE
NAME
STREET ADDRESS
CITY-ST-ZIP
*President
John E. Bottoms, Jr.
400 Summit Ridge Pl. #200
Longwood, FL 32779*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

FILE
NAME
STREET ADDRESS
CITY-ST-ZIP
*Vice President
Veronica M. Bottoms
400 Summit Ridge Pl. #200
Longwood, FL 32779*

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

13. I hereby certify that the information supplied with this filing does not conflict with the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate. 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 on an attachment with an address, with or without the corporation.

SIGNATURE: *John E. Bottoms, Jr* *9/11/02*

SIGNATURE AND TITLE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

980319
PO 1000114062

400 Summit Ridge Place #200
Longwood, Florida 32779

Phone 407-786-5152
Fax 407-786-8640

September 11, 2002

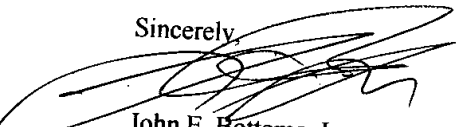
DIVISION OF CORPORATION
P.O. BOX 1500
TALLAHASSEE, FL 32302-1500

To whom this may concern,

I was totally unaware of any annual Corporation filing requirement. I did not receive any notice of such a required filing. I have moved to a new address, and this is probably why I did not receive my notice.

Please waive all late filing fees that I may owe, do to my not receiving notice.

Sincerely,



John E. Bottoms, Jr.
President