## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000004661

Title:

Name:

Address:

City-St-Zip:

Entity Name: AMERICAN HOME EQUITY CORPORATION

FILED Feb 20, 2008 Secretary of State

Thirty Name: 7 Will No AV FOWE EQUITY CONTROL					
Current Principal Place of Business:			New Principal Place of Business:		
	IN STREET, # A, CA 92705	225 US			
Current Mailing Address:			New Mailing Address:		
	IN STREET, # A, CA 92705	225 US			
FEI Number:	52-2322564	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of Co	ırrent Registered Agent:	Name and Address of	ame and Address of New Registered Agent:	
1200 SOUT	ORATION SYS TH PINE ISLAN DN, FL 33324				
The above in the State		ubmits this statement for the p	ourpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	:E:				
Electronic Signature of Registered Age			ent	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PRD ( ) POTT, ALAN M 2677 N. MAIN ST SANTA, CA 927		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	` '	Delete	Title:		
Address: City-St-Zip:	POTT, ALAN M 2677 N. MAIN ST SANTA ANA, CA		Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Address:	2677 N. MAIN ST SANTA ANA, CA	92705 Delete : REET, # 225	Address:	( ) Change ( ) Addition ( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: ALAN M. POTT PR 02/20/2008

( ) Delete

2677 N. MAIN STREET. # 225

KLUENDER, NANCY

SANTA ANA, CA 92705

() Change () Addition