2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002072

Entity Name: AFI MORTGAGE INC.

COHN, ARTHUR

BELTSVILLE, MD 20705

11720 BELTSVILLE DRIVE, SUITE 160

Name:

Address: City-St-Zip: FILED Jan 02, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 11720 BELTSVILLE DRIVE, SUITE 160 BELTSVILLE, MD 20705 **Current Mailing Address: New Mailing Address:** 11720 BELTSVILLE DRIVE, SUITE 160 BELTSVILLE, MD 20705 FEI Number: 52-1845409 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: COHN, ARTHUR 5342 NW 26TH CIRCLE BOCA RATON, FL 33496 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition ISAAC, STEVEN Name: Name: 11720 BELTSVILLE DRIVE, SUITE 160 Address: Address: City-St-Zip: BELTSVILLE, MD 20705 City-St-Zip: Title: DV Title: () Delete () Change () Addition Name: KESECKER, KEVIN Name: 11720 BELTSVILLE DRIVE, SUITE 160 Address: Address: BELTSVILLE, MD 20705 City-St-Zip: City-St-Zip: Title: Title: DST () Delete () 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.

Name:

Address:

City-St-Zip:

SIGNATURE: STEVEN ISAAC CP 01/02/2008