

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F05000003681

FILED
Mar 20, 2007
Secretary of State

Entity Name: AMERICAN MIDWEST MORTGAGE CORPORATION

Current Principal Place of Business:

6363 YORK ROAD, SUITE 300-A
PAMA HEIGHTS, OH 44130

New Principal Place of Business:

6363 YORK ROAD, SUITE 300-A
PARMA HEIGHTS, OH 44130

Current Mailing Address:

6363 YORK ROAD, SUITE 300-A
PAMA HEIGHTS, OH 44130

New Mailing Address:

13902 NORTH DALE MABRY HWY
#165
TAMPA, FL 33618

FEI Number: 34-1180767

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIGSBY, ROBERT L II
101 PLAZA REAL SOUTH, UNIT 511
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

JOSE, PARADA R
13902 NORTH DALE MABRY HWY
#165
TAMPA, FL 33618 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: JOSE R. PARADA

03/20/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: PAULOZZI, JOHN L
Address: 10609 APPLETON DRIVE
City-St-Zip: PARMA HEIGHTS, OH 44130

Title: VSD () Delete
Name: PAULOZZI, JOHN J
Address: 10609 APPLETON DRIVE
City-St-Zip: PARMA HEIGHTS, OH 44130

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: JOHN L. PAULOZZI

PTD

03/20/2007

Electronic Signature of Signing Officer or Director

Date