FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

May 13 1998 8:00am CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** F95000004182 (0) 1. Corporation Name HAMMER FINANCIAL CORPORATION Principal Place of Business Mailing Address 22 WEST JEFFERSON STREET 22 WEST JEFFERSON STREET DO NOT WRITE IN THIS SPACE ROCKVILLE MD 20850 ROCKVILLE MD 20850 3. Date Incorporated or Qualified 08/30/1995 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 52-1762796 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be **Trust Fund Contribution** Added to Fees 23 28 Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MICHNICK, HOWARD 82 Street Address (P.O. Box Number is Not Acceptable) 150 E. PALMETTO PARK ROAD, STE 445 83 BOCA RATON, FL 33432 Zip Code FL Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Addition NAME CRAMES, ARTHUR 1.2 NAME STREET ADDRESS 19 BRIARCLIFFE ROAD 1.3 STREET ADDRESS CITY - ST - ZIP UPPER SADDLE RIVER, 1.4 CITY - ST - ZIP NJ 07458 TITLE 2.1 TITLE DELETE Change Addition NAME CRAMES, DALE 2.2 NAME STREET ADDRESS 19 BRIARCLIFFE ROAD 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY - ST - ZIP UPPER SADDLE RIVER, NJ 07458 DELETE TITLE 3.1 TITLE Change Addition MITCHELL, STEPHEN A NAME 3.2 NAME STREET ADDRESS 7209 BETTENDORF COURT 3.3 STREET ADDRESS CITY - ST - ZIP ROCKVILLE, MD 20855 3.4 CITY - ST - ZIP TITLE DELETE 4.1 TITLE Change Addition NAME MICHNICK, HOWARD 4.2 NAME STREET ADDRESS 1400 S. OCEAN BLVD 1501N 4.3 STREET ADDRESS CITY - ST - ZIP BOCA RATON, FL 33432 4.4 CITY - ST - ZIP TITLE 5.1 TITLE D DELETE Change NAME BRAINUM, SELMA 5.2 NAME 1400 S. OCEAN BLVD 1501N STREET ADDRESS 5.3 STREET ADDRESS BOCA RATON, FL 33433 CITY - ST - ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE NAME 6.2 NAME -05/14/98--01012--036 6.3 STREET ADDRESS STREET ADDRESS \*\*\*150.00 CITY - ST - ZIP 6.4 CITY - ST - ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Information Indicated on this annual report or supplemental annual report is true and accurate and that 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

PRESIDENT

STEPHEN A. MITCHELL

on an attachment with an address.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

my name appears in Block

FLORIDA DEPARTMENT OF STATE

CRZE034 (10/97)

**FILED**