

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

FILED
Jun 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # F95000005455 (9)

1. Corporation Name
SMALL BUSINESS LOAN SOURCE, INC.



Principal Place of Business 5333 WESTHEIMER, SUITE 840 HOUSTON TX 77056	Mailing Address 5333 WESTHEIMER, SUITE 840 HOUSTON TX 77056
--	--

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/07/1995	
21	22	26	27	4. FEI Number 76-0483440	Applied For <input type="checkbox"/> Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	24	25	28	29	30
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA ST. TALLAHASSEE FL 32301				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				FL			

11. 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 _____ (NOTE: Registered Agent signature required when reinstalling) DATE _____

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CT	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JOHNSON, ALBERT J II		1.2 NAME		
STREET ADDRESS	5333 WESTHEIMER, SUITE 840		1.3 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX 77056		1.4 CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHULTE, JOHN B		2.2 NAME		
STREET ADDRESS	5333 WESTHEIMER, SUITE 840		2.3 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX 77056		2.4 CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	DANFORTH, FRED C		3.2 NAME		
STREET ADDRESS	175 PORTLAND ST., SUITE 300		3.3 STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA 02114		3.4 CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	MCGRATH, ALEXANDER S		4.2 NAME		
STREET ADDRESS	175 PORTLAND ST., STE. 300		4.3 STREET ADDRESS		
CITY-ST-ZIP	BOSTON MA 02114		4.4 CITY-ST-ZIP		
TITLE	P	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHULTE, JOHN B JR.		5.2 NAME		
STREET ADDRESS	5333 WESTHEIMER, SUITE 840		5.3 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX 77056		5.4 CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HARRIS, PATRICIA C		6.2 NAME		
STREET ADDRESS	5333 WESTHEIMER, SUITE 840		6.3 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX 77056		6.4 CITY-ST-ZIP		

14. I hereby 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 my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____

5/27/98 713-961-5626

CR2E034 (10/97)