

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F97000002121**
1. Corporation Name

Assurance Mortgage Corporation of America

Principal Place of Business

**20 Blanchard Rd.
Burlington, MA 01803**

Mailing Address

**20 Blanchard Rd.
Burlington, MA 01803**

2. Principal Place of Business

21 20 Blanchard Rd.
Suite, Apt. #, etc

22 City & State

23 Burlington MA

24 01803 **25 USA**

2a. Mailing Address

26 20 Blanchard Rd.
Suite, Apt. #, etc

27 City & State

28 Burlington, MA

29 01803 **30 USA**

3. Name and Address of Current Registered Agent

**Dana
Ross Cohen
Mr. C's Auto Sales
4791 North Federal Highway
Pompano Beach, FL 33064**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL **85** Zip Code

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

Signature, typed or printed name of registered agent and then of applicant

(NOTE: If a new officer or director is being added, please include the following information.)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE **President** [DELETE]

NAME **Steven B. Edelstein**
STREET ADDRESS **20 Blanchard Rd.**

CITY-STATE-ZIP **Burlington MA 01960** [DELETE]

12.2 TITLE **Exec. VP/Secretary** [DELETE]

NAME **Robert A. Edelstein**
STREET ADDRESS **20 Blanchard Rd.**

CITY-STATE-ZIP **Burlington MA 01960** [DELETE]

12.3 TITLE **Exec. VP/Treasurer** [DELETE]

NAME **Paul H. Gershkowitz**
STREET ADDRESS **20 Blanchard Rd.**

CITY-STATE-ZIP **Burlington MA 01960** [DELETE]

12.4 TITLE [DELETE]

NAME [DELETE]

STREET ADDRESS [DELETE]

CITY-STATE-ZIP [DELETE]

12.5 TITLE [DELETE]

NAME [DELETE]

STREET ADDRESS [DELETE]

CITY-STATE-ZIP [DELETE]

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

[DELETE] [CHANGE] [ADD]

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY-STATE-ZIP

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY-STATE-ZIP

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY-STATE-ZIP

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY-STATE-ZIP

13.17 TITLE

13.18 NAME

13.19 STREET ADDRESS

13.20 CITY-STATE-ZIP

13.21 TITLE

13.22 NAME

13.23 STREET ADDRESS

13.24 CITY-STATE-ZIP

13.25 TITLE

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY-STATE-ZIP

13.29 TITLE

13.30 NAME

13.31 STREET ADDRESS

13.32 CITY-STATE-ZIP

13.33 TITLE

13.34 NAME

13.35 STREET ADDRESS

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-03/15/99-01128-024
******150.00 ****150.00**

208
3/8/99

SIGNATURE: **Steven B. Edelstein**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-4-99

(781) 229-1999

CR2E034 (1/98)