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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9700004562 (1)

SIMPLE MORTGAGE U.S.A., INC.

## FILED Jan 28 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address						
1740 E. GARRY AVE., #109 SANTA ANA CA 82705		1740 E. GARRY AVE., #109 SANTA ANA CA 82705						
					DO NOT WRITE IN THIS SPACE			
							SPACE	
					3. Date Incorporated or Qualified 08/28/1997	,		
2. Principal Pl	ace of Business	2a, Mailing Address			4. FEI Number			applied For
21		26			33-0740073		<b>—</b>	lot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional			
22		27			5. Certificate of Status Desired	L		lequired
City & State	)	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28			Trust Fund Contribution			to Fees
Zip	Country	Zip	Cou	ıntry	8. This corporation owes or has	paid the ci	urrent year Ir	ntangible
24	25	29	30		Personal Property Tax due Ju-			☐ No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New I	tegistered	Agent	
	CORPORATION SYSTEM			81 Name				ļ
1200 SOUTH PINE ISLAND ROAD				B2 Street A	Address (P.O. Box Number is Not Accept	able)		
PLA	NTATION FL 33324				· · · · · · · · · · · · · · · · · · ·	·		
				83				
				84 City			<b>85</b> Zip	Code
						FI	<b>-</b>     .	
<b>11.</b> Pursuant to office or reagent. I an	o the provisions of Sections 607 0502 ogistered agent, or both, in the State on tamiliar with, and accept the obliga	2 and 607.1508, Florida Statu of Florida Such change was tions of, Section 607.05 <mark>05</mark> , Fl	tes, the al authorize lorida Stat	bove-named o d by the corporations.	corporation submits this statement for the oration's board of directors. I hereby acc	ept the ap	of changing pointment a	ils registered s registered
SIGNATURE :	Signature, typed or printed name of registered agen	it and title if applicable (NO	TE Registere	d Agent signature r	required when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFF	ICERS AN	ID DIRECTO	RS IN 12
TIFLE	PST	DELETE	1.1 H	TLE			Change	Addition
NAME	BUCKLEY, EVAN		1.2 N/	AME				į
STREET ADDRESS	1740 E. GARRY AVE., #109		1.3 \$	TREET ADDRESS				
CITY-ST-ZIP	Santa ana ca 92705		1.4 CI	ITY-ST-ZIP				
TITLE	DC	☐ DELETE	2.1 TI	TLE			Change	Addition
NAME	BUCKLEY, EVAN		2.2 N	AME .				
STREET ADDRESS	1740 E. GARRY AVE., #109		2351	FREET ADDRESS				ľ
CITY-ST-ZIP	SANTA ANA CA 92705		2.40	HTY-ST-ZIP				
TITLE		DELETE	3.1 70	TLE			Change	☐ Addition
NAME			3.2 N/	AME				
STREET ADDRESS			3.3 \$1	TREET ADDRESS				
CITY-ST-ZIP			3.4. C	ITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TC	TLE			Change	Addition
NAME			4.2 N	IAME				
STREET ADDRESS			4.3 ST	FREET ADDRESS				Į
CITY-ST-ZIP			4.4 CI	ITY-ST-ZIP				
TITLE		DELET <b>E</b>	5.1 TO	TLE			Change	Addition
NAME			5.2 N/	AME				
STREET ADDRESS			5.3 ST	TREET ADDRESS				
CITY-ST-ZIP	_		5.4 CI	TY-ST-ZIP				
TITLE		☐ DELETE	6.1 71				Change	Addition
NAME			6.2 N/	AME				1
STREET ADDRESS				TREET ADDRESS				1
CITY-ST-ZIP				TY-ST-ZIP				1

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.

10NATURE: 1-13-98 714-260-604\$