File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris ANNUAL REPORT THED Secretary of State 1999 **DIVISION OF CORPORATIONS** 99 APR 14 AN 10: 45 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Colombatte (m. Solano TAULAHASSEE, ELORIDA Name and Mailing Address
of Limited Liability Company **DOCUMENT # M97000000656** 1a. Principal Place of Business Address ALLIED BANCSHARES MORTGAGE GROUP, LLC 836 RITCHIE HWY. STE. 13 836 RITCHIE HWY. STE. 13 SEVERNA PARK MD 21146 SEVERNA PARK MD 21146 3. Date Organized or Qualified 2a. Mailing Address 3a. State of Formation 09/30/1997 MD Suite, Apt. #, etc. 4. FET Number Applied For City & State 52-1886818 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country \$8.75 Additional Fee Required 04/06/1998 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office CT CORPORATION SYSTEM James Gregory Murphy 1200 SOUTH PINE ISLAND RD. Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 8129 Las Palmas Way Suite, Apt. #, etc. Naples 9. Pursuant to the provisions of Sections 808 416 and 608 508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations. DAIL 3/24/99 SIGNATURE . 10. Title Managing Members/Magagers **Business Street Address** City, State and Zip Code 844 RITCHIE HWY. STE.202 MGRM REESE, RICHARD G JR. SEVERNA PARK MD 844 RITCHIE HWY., STE. 202 MGRM] CASEY, JAMES T SEVERNA PARK MD MGRM DRUMMOND, MICHAEL W 7833 WALKER DR., STE. 660 GREENBELT MD GOOOO2'848106- 1 -04/22/93-01104-003 \*\*\*\*188.75 \*\*\*\*188.75 1c,19-19 11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Hurther certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empoyered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address

SIGNATURE: