

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000076676

Entity Name: A MORTGAGE FINANCE, INC.

FILED  
Jan 30, 2004  
Secretary of State

## Current Principal Place of Business:

903 EMMETT STREET SUITE #1  
KISSIMMEE, FL 34741

## New Principal Place of Business:

## Current Mailing Address:

903 EMMETT STREET SUITE #1  
KISSIMMEE, FL 34741

## New Mailing Address:

FEI Number: 59-3743414

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ECHAVARRIA, JUAN A  
2012 PITCH WAY  
KISSIMMEE, FL 34746 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: ECHAVARRIA, JUAN A  
Address: 2012 PITCH WAY  
City-St-Zip: KISSIMMEE, FL 34746

Title: VPT ( ) Delete  
Name: ECHAVARRIA, JEFFREY A  
Address: 10710 NW 66 ST. #206  
City-St-Zip: MIAMI, FL 33178

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUAN A. ECHAVARRIA

PD

01/30/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date