

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032690

FILED
Apr 13, 2006
Secretary of State

Entity Name: ADVANTAGE MORTGAGE BROKER SCHOOL, INC.

Current Principal Place of Business:

354 N CYPRESS DR SUITE 11
TEQUESTA, FL 33469

New Principal Place of Business:

19900 MONA RD.
SUITE 102
TEQUESTA, FL 33469

Current Mailing Address:

354 N CYPRESS DR SUITE 11
TEQUESTA, FL 33469

New Mailing Address:

19900 MONA RD.
SUITE 102
TEQUESTA, FL 33469

FEI Number: 56-2436367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASMAN, DONNA M
13557 156TH ST. N.
JUPITER, FL 33478 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: PSTD () Delete
Name: ASMAN, DONNA M
Address: 354 N CYPRESS DR SUITE 11
City-St-Zip: TEQUESTA, FL 33469

Title: V () Delete
Name: HILL, CHAD K
Address: 354 N CYPRESS DR SUITE 11
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: ASMAN, DONNA M
Address: 19900 MONA RD. SUITE 102
City-St-Zip: TEQUESTA, FL 33469

Title: V (X) Change () Addition
Name: HILL, CHAD K
Address: 19900 MONA RD. SUITE 102
City-St-Zip: TEQUESTA, FL 33469

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DONNA M. ASMAN

P

04/13/2006

Electronic Signature of Signing Officer or Director

Date