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 # P96000010896 (4)

APPROVED HOME MORTGAGE CORP.

FILED Apr 21 1998 8:00am Secretary of State

I IONO DIAL			

Principal Place		Mailing A						**************************************	- · · · · · · · · · · · · · · · · · · ·				
1431 N PALM AVE 1431 N PALM AVE PEMBROKE PINES FL 33026 PEMBROKE PINES FL 33026				026	126								
								DO NOT WRITE IN THIS	SPACE			_	
								Date Incorporated or Qualified 01/31/1996					
2. Principal Pl	ncipal Place of Business 2a. Mailing Address							4. FEI Number			Applied For		
21 1225	1 TAFT ST, STE 26							65-0642575		Not	Applicable	1	
Suite, Apt.								5. Certificate of Status Desired	\$8.7	75 A	dditional	1	
22 40	101							5. Certificate of Status Desired	Fe	e Rec	periup	İ	
City & State	9	City &	State				-	6. Election Campaign Financing	\$5.	.00	May Be	1	
23 PEMBRO	ROKE PINES, FL 28							Trust Fund Contribution					
Zip	Country	Zip		Cour	Country			8. This corporation owes or has paid the current year Intangible				1	
24 33°	126 25 BROWARD	29		30				Personal Property Tax due June 30.	Yes		No	1	
	9, Name and Address of Current	Registered A	Agent					10. Name and Address of New Registered	Agent]	
	NTOS, JACQUELINE				81	Name						1	
402	25 SOUTHWEST 148 TERRACE			-	82	Street A	ddaa	ss (P.O. Box Number is Not Acceptable)				┨	
MN	RAMAR FL 33027			1	ᅄ	Street A	-coores	ss (P.O. Box Number is Not Acceptable)				ı	
				ľ	83							1	
				L	_							╛	
				ŀ	84	City		FI	85	Zip C	Code		
11 Pursuant t	to the provisions of Sections 607 0502	and 607 150	8. Florida Statuti	as the ah	l	s-named c	COLDO			no its	registered	-	
office or re	egistered agent, or both, in the State of	of Florida, Suc	h change was a	uthorized	by	the corpo	oratio	ration submits this statement for the purpose n's board of directors. I hereby accept the ap	pointmen	l as r	egistered		
agentia/	m tamiliar with, and accept the obligat	tions or, Section	on 607.0505, Fig	rioa Statu	Jies	5 .							
SIGNATURE .	Signature, typed or printed name of registered again	e and title if acretica	ble (NOT)	C. Dooistored	400	nt eigenture r	roo irod	when reinstating) DATE					
12.	OFFICERS AND		inon) sad	13.	Age	ili edirettire i	requieu	ADDITIONS/CHANGES TO OFFICERS AN	D DIREC	TORS	S IN 12	Į	
TITLE	P	21111070110	DELETE	1,1 7(1	LE			7.001110/10/01/1110E0 TO OTT TOETO 711	Char		Addition	Տ	
NAME	SANTOS, JACQUELINE			1.2 NAI					_	•	_		
STREET ADDRESS	4025 SOUTHWEST 148 TERR	ACE				ADDRESS						8	
CITY-ST-ZIP	MIRAMAR FL	_										Į	
TITLE	D		DELETE	1.4 CIT 2.1 TIT		1-212			Char		☐ Addition	48	
NAME	SANTOS, EVERARDO			2.1 III					المالان و	.Ac	notitos	`	
	1630 WEST 46 ST., #506					*********							
STREET ADORESS	HIELEAH FL					ADDRESS							
CITY-ST-ZIP	ST		DELETE	2.4 CI		ST-ZIP			T Ob-		Addition	4	
TITLE	SANTOS, EDUARDO		☐ Nettit	3.1 TITE					☐ Chai	ığe	Addition		
NAME	4025 SOUTHWEST 148 TERR	ACE		3.2 NAI	-								
STREET ADDRESS	MIRAMAR FL	AVE				ADDRESS							
CITY-S1-ZIP			F7 56.222	3.4. CI	****	T-ZIP			·		T 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	-	
TITLE	D CANTOC UN DA		DELETE	4.1 111					Char	ige	Addition		
NAME	SANTOS, HILDA			4. 2 NA	ME								
STREET ADDRESS	1830 WEST 46 ST., #506			4.3 STP	RET.	ADDRESS							
CITY+ST-ZIP	HIALEAH FL			4.4 CIT		T-ZIP						1	
TITLE	VP		☐ DELETE	5.1 1111	LE				Chai	nge -	Addition		
NAME	FERRER, HILDA			5.2 NA	ME							1	
STREET ADDRESS	11989 S.W. 17 COURT			5.3 STF	REET	ADDRESS						1	
CHY-ST-ZIP	MIRAMAR FL			5.4 CIT	Y - S1	T- ZIP						1	
TITLE			DELETE	6.1 TITI	-		-		Char	nge	■ Addition	1	
NAME				6.2 NAI						-		ı	

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 13 if changed on an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

STREET ADDRESS