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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000050915 (3)

AAA HOME BUYERS, INC.

FILED Apr 22 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						1 D TERITOR	IO JOHO BIHLI OBLIK D	Ann koin Obiki bili				
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13522 DUNN CREEK ROAD 13522 DUNN CREEK ROAD JACKSONVILLE FL 32218 JACKSONVILLE FL 32218												
•		0.101.01	SUMMODITION TO SELECT				DO NOT WRITE IN THIS SPACE					
							3. Date Incorp 06/10/19	orated or Qualif	ied	-		
2. Principal Place of Business 2a. Mailing Address							4. FEI Number				Applied For	
21 AAA	Home buyer Fr	10 26 8	817 New Berlin RO				59-3383480				Not Applicable	
Suite, Apt.	#, elc.	Suite	Suite, Apt. #, etc.				E Consideration	5. Certificate of Status Desired \$8.75 Additional				
City & State	Home buyer In	'0 27 City 8	City & State					6. Certificate of Status Desired Fee Required				
23 JA y	i Di	بر ر⊢	28 JAX PL				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Žip •	Country	Zip		Cou	untry			ation owes or ha				
24 3∂	218 25	29	אובג	30	•			operty Tax due		_ ′	□ No	
-	9. Name and Address of Cur		Agent	11	丁		10. Name and			gent		
KOON, PATRICIA ANN						Name D	م المالية	- V-	(N.2)			
13522 DUNN CREEK ROAD					82	4 1	atricia ,	TNN KO	7070			
	CKSONVILLE FL 32218					Street Add	tress (P.O. Box Num	Der is Not Acce	Display of the state of the sta			
					83		7,000	0.11.				
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					84	City -	- /		FL	85 Zij	Code	
11 Purcupat	to the provisions of Sections 607.0	1502 and 607 160	9 Florida Stati	tos the o	boug	-Domod sor	coration submits thi	e statement for		changing	ita registered	
office or r	registered agent, or both, in the St im familiar with, and accept the ob-	ate of Florida, Suc	ch change was	authorize	ed by	the corpora	ation's board of direct	ctors. I hereby a	ccept the appo	intment a	s registered	
					atutes.	11	- ^ 4	1 ~			/	
SIGNATURE	Signature, typed or president ments of registered	NOON .	Pres.	dent		Gani	CIA U. R Jired when reinstating)	00-	<u> </u>	2-98		
12.		AND DIRECTORS		13.		ii signatore radi		CHANGES TO C	FEICERS AND	DIRECTO	DRS IN 12	
TITLE	T D		DELETE	1.1 1				7.3.4020.0	17.02,07.00	Change		
NAME	KOON, PATRICIA ANN			1	NAME							
STREET ADDRESS	13522 DUNN CREEK ROA	D		•		ADDRESS					ĺ	
CITY-ST-ZIP	JACKSONVILLE FL 32218	_									ľ	
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STREET ADDRESS				5.3 S	TREET A	ADDRESS						
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NAME				6.2 N	IAME	1						
STREET ADDRESS				6.3 S	TREET A	ADDRESS					1	
CITY-ST-ZIP				6.40	HTY-ST	- ZIP						
	certify that the information supplied	with this filing do	oes not qualify				n Section 119.07(3)(), Florida Statut	es. I further cer	tify that th	ne 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.