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

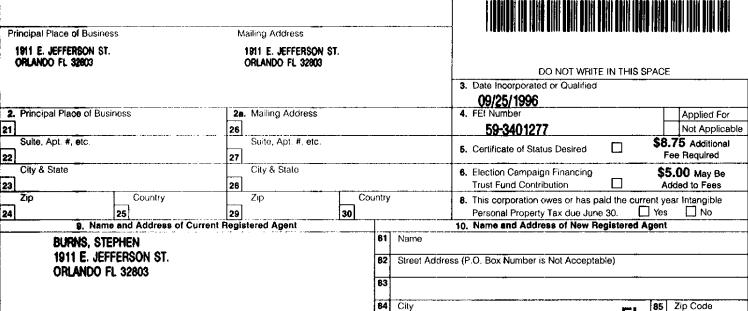
DOCUMENT # 1. Corporation Name P96000079384 (9)

AAA MORTGAGE ADVISORS, INC.

Principal Place of Business

Mailing Address

FILED May 05 1998 8:00am Secretary of State



11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation 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 the corporation's board of directors. I hereby accept the appointment as registered

agent tam taminar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE Signature, typoid or printed name of registered agent and tilled if applicable (NOTE Registered Agent signature required when reinstating) DATE				
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	11 TITLE	Change Addition
NAME	Burns, Stephen J		12 NAME	1 1 1 1 N. 12 11 2021 20 1
STREET ADDRESS	1911 E. JEFFERSON ST.		1.3 STREET ADDRESS	1510 E. Colonia Dr. Suite auswest
CITY - ST - ZIP	ORLANDO FL 32803		1.4 CITY-ST-ZIP	1510 E. Colonial Dr. Suite 203 West Orlando Ph 30803
TITLE	VP	DELETE	21 TITLE	Change Addition
NAME	MOODY, KIM		2.2 NAME	c
STREET ADDRESS	1911 E. JEFFERSON ST.		2 3 STREET ADDRESS	(Some) Addition
CITY-ST-ZIP	ORLANDO FL 32803		2. 4 CITY - ST - ZIP	_
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP	L		4.4 CITY - ST - ZIP	
TITLE		☐ DEL ete	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE	-	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
AUTO 07 7/0			CADITY OF TID	

14. Thereby 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 12 or Block 13 if changed, or on an attachment with an address.

407