

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000008375

FILED
Apr 27, 2006
Secretary of State

Entity Name: ASSOCIATED MORTGAGE INTERNATIONAL CORPORATION

Current Principal Place of Business:

1600 SOUTH DIXIE HIGHWAY
SUITE 300
BOCA RATON, FL 33432

New Principal Place of Business:

Current Mailing Address:

1600 SOUTH DIXIE HIGHWAY
SUITE 300
BOCA RATON, FL 33432

New Mailing Address:

FEI Number: 65-0722321

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHANE, ROBERT PDT
1600 SOUTH DIXIE HIGHWAY
SUITE300
BOCA RATON, FL 33432 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: PDT () Delete
Name: SHANE, ROBERT
Address: 1600 SOUTH DIXIE HIGHWAY, SUITE 300
City-St-Zip: BOCA RATON, FL 33432

Title: DVST () Delete
Name: SHANE, RONALD
Address: 1600 SOUTH DIXIE HIGHWAY, SUITE 300
City-St-Zip: BOCA RATON, FL 33432

Title: DVP () Delete
Name: SHANE, RENEE
Address: 1600 SOUTH DIXIE HIGHWAY, SUITE 300
City-St-Zip: BOCA RATON, FL 33432

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: RONALD SHANE

DVST

04/27/2006

Electronic Signature of Signing Officer or Director

Date