2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2003
Secretary of State

DOCUMENT# P97000008375

Entity Name: ASSOCIATED MORTGAGE INTERNATIONAL CORPORATION

Current Principal Place of Business:

1489 WEST PALMETTO PARK ROAD
SUITE 475
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

1489 WEST PALMETTO PARK ROAD
SUITE 475
BOCA RATON, FL 33486

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 F
1489 WEST PALMETTO PARK ROAD
SUITE 475
BOCA RATON, FL 33486

Name and Address of New Registered Agent:

SHANE, ROBERT
1489 WEST PALMETTO PARK ROAD
SUITE 475
BOCA RATON, FL 33486

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: ROBERT SHANE 04/29/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SHANE, ROBERT F
Address: 1489 W PALMETTO PARK RD, STE 475
City-St-Zip: BOCA RATON, FL 33486

Title: DVST ( ) Delete
Name: SHANE, RONALD
Address: 1489 W PALMETTO PARK RD, STE 475
City-St-Zip: BOCA RATON, FL 33486

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SHANE, ROBERT
Address: 1489 W PALMETTO PARK RD, STE 475
City-St-Zip: BOCA RATON, FL 33486

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 Section 119.07(3)(i), 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: ROBERT SHANE PD 04/29/2003
Electronic Signature of Signing Officer or Director — Date