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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000042865 (0)

AMMEDIATE MORTGAGE OF FLORIDA, INC.

Principal Place of Business

Mailing Address

FILED May 08 1998 8:00am Secretary of State



222 ATLAS LANE SATELLITE BEACH FL 32937		222 ATLAS LANE SATELLITE BEACH FL 32937			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
2. Principal Place	of Business	2a. Mailing Address				Applied For	
21 206 BrookHill DC		26 206 BrookHill Dr			The state of the	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75	Additional	
22 COCOA F/		27 COCOA FI			I & Certificate of Status Desired I I	Required	
City & State		City & State			6. Election Campaign Financing \$5.00	0 May Be	
23		28				to Fees	
24 32926	Country 25 USA	29 32-926 30 US			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
10. Haille and Address of Content registered Agent							
SAPORITO, DAVID			°	Name			
222 ATLAS LANE SATELLITE BEACH FL 32937					Address (P.O. Box Number is Not Acceptable)		
			8	3			
				4 City	FL ! `	Code	
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 Syste of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the phligations of, Section 607.0505, Florida Statutes.							
SIGNATURE	Land	- David Si	NON'	40	required when reinstating) 4/24/98		
12.	OFFICERS AND		13.	igen; signature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	RS IN 12	
	President	DELETE	1.1 TITLE		Change		
NAME	David Seporito	1.21		E			
STREET ADDRESS	200 BrockHillOr		1.3 STREET ADDRESS				
CITY-ST-ZIP	COLON E1 32976		1.4 CITY	- ST - ZIP			
TITLE	☐ DELETE :		2 1 TITLE		☐ Change	Addition	
NAME			2 2 NAME				
STREET ADDRESS		2.3 STREFT ADDRESS		FT ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP				
TITLE	☐ D€LETE		3.1 TITLE		Change	☐ Addition	
NAME			3.2 NAM	E			
STREET ADDRESS			3 3 STRE	ET ADDRESS			
CITY-ST-ZIP			_	- ST- ZIP	-		
TITLE	•	DELETE	4.1 TITLE		L] Change	Addition	
NAME			4. 2 NAV				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CITY 5.1 TITLE		Change	Addition	
NAME			1		Change	L. J Addition	
STREET ADDRESS			5.2 NAM				
				ET ADDRESS		ł	
CITY-ST-ZIP TITLE		☐ DELETE	5.4 CITY 6.1 TITLE		Change	Addition	
NAME			6.2 NAMI	- 1	Change		
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.4 CITY				
	that the information supplied with	this filing does not qualify for			d in Section 119.07(3)(i), Florida Statutes. I further certify that th	e information	