PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P98000008159**1. Corporation Name

ATLANTIC INTERNATIONAL MORTGAGE HOLDINGS, INC.

FILED Mar 29, 1999 8:00 am Secretary of State

03-29-1999 90012 050 ***150.00

Principal Place of Business Malling Address									
2502 ROCKY POINT DRIVE STE. 862. 2502 ROCKY POINT DRIVE S				62					
TAMPA FL 33607 TAMPA FL 33607						DO NOT WRITE IN THIS SPACE			
l		•				3. Date incorporated or Qualifed			
		•				01/26/1998			į
Principal Ptace of Business						4. FEI Number	Ani	olied For	
<u> </u>						59-3324278	1	Applicable	
21	26 Suite, Apt. #, etc.				1		\$8.75 A		
22	762 27			762		5. Certificate of Status Desired	Fee Re		
	City & State City & State					6. Election Campaign Financing	\$5.00	May Be	<u></u>
23						Trust Fund Contribution	Added t	,	Į
Zip	Country Zip			Country		8. This corporation owes the current year Intangible			l
24	25	<u> </u>	30	•		Personal Property Tax.		□No]	!
241	9. Name and Address of Current			Т.		10. Name and Address of New Registered	Agent		l
				81	Name				
SOL	OMON, STANFORD R			<u> </u>	<u> </u>	(C. C. St., Marsia Not Acceptable)			i
%SOLOMON & BENEDICT, P.A.				82 Street Address (P.O. Box Number is Not Acceptable)					ļ
400 N. ASHLEY DR. STE. 3000				83					
TAM	PA FL 33602						11-2:		1
				84	City	Fi	85 Zip 0	,00e	
11 Sumunt	to the agricions of Sections 607 (150)	2 and 607 1508 Florida Statute	s the s	bove-r	ramed com	poration submits this statement for the purpose o	f changing its	registered	
					a corporation	on's board of directors. I hereby accept the appo	intment as req	jistered	
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Flor	ida Stai	utes,					i
SIGNATURE	Signature, typed or printed name of registered agen	A distant di Acadi antin	Ondistana.	t Arrest ii	overheen earn úth	d when reinstating) DATE			=
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	CR2E034 (11/98)
TITLE	D	DELETE	1.1 T		$\overline{}$		Change	Addition	Ξ
NAME	LIVINGSTON, STEVEN L	— , ,	1.2 NAA		l				×
STREET ADDRESS	2502 ROCKY POINT DRIVE STE. 862			TREET A	nnerss				í
1	TAMPA FL 33607	L. VVC		11Y-ST-2					য়
CITY-\$1-ZP	D	DELETE	217				Change	Addition	ប
NAME	ATTEBERRY, WILLIAM L)		22 NAME					i
	2502 ROCKY POINT DRIVE ST	TE 060		TREET AL	nacce				!
STREET ADORESS	TAMPA FL 33607	1 <u>C</u> .·QU2			i		•	j	l
CITY-ST-ZIP		☐ DELETE	31 T	TTY-ST-	<u> </u>		Change	Addition	l
TITLE	D DOWN THOMAS	- Arric			Į				l
- NAME === -	_BROWN, THOMAS			ALAE					i
STREET ADDRESS	I ARAM INFORMATION DOMESTIC CT	TE 000	·· a — —	MAE.	nocce				· —
CTTY-ST-ZIP	2502 ROCKY POINT DRIVE ST	TE. 862	335	TREET A	ŀ	والمنافرة والمستورة والمست			
	TAMPA FL 33607	<u> </u>	3.3 \$	TREET A	ŀ		☐ Change	Addition	,
TITLE	TAMPA FL 33607	TE. 862	3.3 \$ 3.4.0 4.1 Ti	TREET AL	ŀ		Change	Addition	,
NAME	TAMPA FL 33607 D STAHLER, ALAN	C) DELETE	3.3 \$ 3.4. 0 4.1 To 4.2 N	TREET AL TTY-ST-: TILE NAME	ZIP		☐ Change	Addition	
NAME STREET ADDRESS	TAMPA FL 33607	C) DELETE	33\$ 34.0 4.1T 4.2N 4.3\$	TREET AL TTY-ST- TILE NAME TREET AL	DOPRESS		Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	TAMPA FL 33607 D STAHLER, ALAN	C) DELETE	33\$ 34.6 4.1 T 4.2 N 4.3 S 4.4 C	TREET AL STY-ST-: TILE WAME TREET AL TIY-ST-2	DOPRESS				
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14. I hereby 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 eath; 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 one attachment with an address, with all other like empowered.

SIGNATURE

MANUSCHIED TO THE OF PRATED NAME OF BIGNING OFFICER OR DIRECTOR

3/24/99 (813)284-7453-Date Designer Phone 8