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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90011 021 ***150.00

DOCUMENT	#	P980000283	57

1. Corporation Name

AMERICA'S LENDING CHOICE, INC.

Principal Place of Business	
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13061 SOUTHWEST 106TH STREET 13061 SOUTHWEST 106T MIAMI FL 33186 MIAMI FL 33186			DO NOT WRITE IN THIS SPACE				
			3. Date Incorporated or Qualifed 03/26/1998				
2. Principal Place of Business 21 9010 SW 137AVE	2a. Mailing Address 26 SAME		4. FEI Number 2/2/2	Applied For Not Applicable			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required			
City & State 23 1 Ami	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 33186 [25] Country (25)	Zip Cou 29 30	intry	This corporation owes the current year In Personal Property Tax.	☐ Yes No			
9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent				
SUAREZ, LUIS J		81 Name					
13061 SOUTHWEST 106TH STREET		82 Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33186		83					
		84 City	FL	85 Zip 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 State 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 obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE		ΓE: Rι	egistered Agent signature i	equired when reinstating)	DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/C	HANGES TO OFFICERS AND		
	DELETE		44			Change	

12.	OFFICERO AND DIRECT	0110	13.	ADDITIONO/BITE 10 CT 10 CT 10 CT		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	SUAREZ, LUIS J		1.2 NAME			ļ
STREET ADDRESS	13061 SOUTHWEST 106TH STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-ST-ZIP			
TITLE	VPD	☐ DELETE	2.1 TTTLE	•	Change	Addition
NAME	SUAREZ, JUAN M		2.2 NAME			ł
STREET ADDRESS	13061 SOUTHWEST 106TH STREET		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186		2.4 CITY-ST-ZIP			
TITLE	STD	☐ DELETE	3.1 TITLE		☐ Change	☐ Addition
NAME	SUAREZ, MERCY		3.2 NAME			
STREET ADDRESS	13061 SOUTHWEST 106TH STREET		3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL 33186		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME		i	4, 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4,4 CITY- \$T-ZIP			
TITLE		☐ DELETE	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			
			EACON OT 710			

14. I hereby certify that the information supplied fifty 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 eport 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 accurate empowered to execute this report as required by Chapter 697, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attach tend with an address, with an other like empowered.

SIGNATURE: