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
Feb 24 1999 8:00 am
Secretary of State

DOCUMENT # P98000032847

1. Corporation Name
Best Home Loan, Inc.

Principal Place of Business
1020 Kings Road
Neptune Beach, FL 32266

Mailing Address

2. Principal Place of Business
21
Suite, Apt # etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt #, etc
27
City & State
28
Zip 29 Country 30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: Apr. 7, 1998
4. FEI Number: 593507889 — Applied For / Not Applicable
5. Certificate of Status Desired: X — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: [ ] — $5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax: [ ] Yes X No

9. Name and Address of Current Registered Agent
Attila Makranczy
1020 Kings Road
Neptune Beach, FL 32266

10. Name and Address of New Registered Agent
81 Name: Justine Maday
82 Street Address (P.O. Box Number is Not Acceptable)
1020 Kings Road
83
84 City: Neptune Beach FL 85 Zip Code: 32266

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: [signature] 2-19-99
Signature, typed or printed name of registered agent and title, if applicable (Not a Registered Agent) — DATE

12. OFFICERS AND DIRECTORS

TITLE	President — X DELETE
NAME	Attila Makranczy
STREET ADDRESS	1020 Kings Rd.
CITY-ST-ZIP	Neptune Beach, FL 32266
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	[ ] DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13 TITLE	President — X Change — X Add
12 NAME	Justine Maday
13 STREET ADDRESS	1020 Kings Road
14 CITY-ST-ZIP	Neptune Beach, FL 32266
21 TITLE	[ ] Change [ ] Add
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	[ ] Change [ ] Add
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	[ ] Change [ ] Add
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	[ ] Change [ ] Add
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	[ ] Change [ ] Add
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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2-24-99

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 constitute my affirmation thereof subject to the penalties for filing false reports with a state officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: Justine Maday — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Feb. 19, 1999 — DATE — 247-3306 — DAYTIME TELEPHONE NUMBER

CR2E034 (11/98)