


**FILED**  
**Apr 12, 1999 8:00 am**  
**Secretary of State**

04-12-1999 90032 043 \*\*\*150.00

<b>PROFIT CORPORATION ANNUAL REPORT 1999</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P98000096904**

1. Corporation Name

**ALL MORTGAGE LOANS INC.**

Principal Place of Business

4325 WEST SUNRISE BLVD.  
PLANTATION FL 33313

Mailing Address

4325 WEST SUNRISE BLVD.  
PLANTATION FL 33313

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/16/1998

4. FEI Number

65-0878834

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional Fee Required6. Election Campaign Financing ☐**\$5.00** May Be Added to Fees

8. This corporation owes the current year intangible

Personal Property Tax.

☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip Country

29

9. Name and Address of Current Registered Agent

**HOLNESS, DALE V C**  
**4325 WEST SUNRISE BLVD.**  
**PLANTATION FL 33313**

10. Name and Address of New Registered Agent

81 Name

**DALE V. C. HOLNESS**

82 Street Address (P.O. Box Number is Not Acceptable)

83 **4325 W. SUNRISE BLVD.**84 City **PLANTATION** FL 85 Zip Code **33313**

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
**PSTD**  
**HOLNESS, DALE V C**  
**4325 WEST SUNRISE BLVD.**  
**PLANTATION FL 33313**
CITY-ST-ZIP ☐ DELETE

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4-6-99 (954) 327-4555**  
 Date Daytime Phone #

CR2E034 (1/1/98)