DOCUMENT # V/U4U3 1. Entity Name AAA MORTGAGE LOANS & INVESTMENTS, INC.						FILED Jan 09, 2001 8:00 am Secretary of State				
Principal Plac	ce of Business		Mailing Address			01-09-200	1 90011 ()22 ***1	50.00	
			7901 4TH ST N SUITE 306							
ST PETERSBUF	RG FL 33702		ST PETERSBURG FL 337							
						l linner merene enner somer mente meten e		180) B181(B)8	I BIBI KAT	
2. Principal P	Place of Busin	ess	3. Mailing Address	. Mailing Address						
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			DO NOT WRITE	IN THIS SF	ACE		
City & State			City & State	City & State		4. FEI Number 59-3145649 Applied For]
					Not Applica				┦	
Zip	İ	Country	Zip	Country	5.	Certificate of Status Desired		8.75 Addee Require		
· · · · · · · · · · · · · · · · · · ·	6, Name	and Address of Current	 Registered Agent	<u> </u>	7.	Name and Address of New Re				
-	2*			Name	به سري خ. _{مس}		-			
PERLMAN, JOSEPH					Street Address (P.O. Box Number is Not Acceptable)					
		RD S. STE B				, ,				-
LAR	GO FL 3377									1
				City			FL	Zip Cod	e	
8. The above	e named entity	submits this statement for	or the purpose of changing	its registered office or	registered ac	gent, or both, in the State of Flor	 da.			1
	,			J						
SIGNATURE										
	Signature, typed	or printed name of registered agent	and title if applicable. (N	IOTE: Registered Agent signatu	re required when	reinstating)	DATE			-
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE						10. Election Campaign Fina		\$5.0	May Be	
_	requirement a eria on back)	and elects to do so.	,	2001 Fee will be \$5 able to Department		Trust Fund Contribution.		Added	to Fees	
11.		OFFICERS AND		12.			ERS AND	DIRECTOR	S IN 11	1_
TITLE	P	<u> </u>	☐ Delete	TITLE				Change	Addition	8
NAME	WAINER, J			NAME						15
STREET ADDRESS	1	ST N SUITE 306		STREET ADDRESS CITY-ST-ZIP						83
CITY-ST-ZIP	V SI PEIER	SBURG FL 33702		TITLE				Change	Addition	CR2E034 (10/00
TITLE NAME	LEE, RONA	ALD F	☐ Delete	NAME :			,			0
STREET ADDRESS		ST N SUITE 306		STREET ADDRESS						1
CITY-ST-ZIP	ST PETER	SBURG FL 33702		CITY-ST-ZIP			-			-
TITLE	1		☐ Delete	TITLE				Change	☐ Addition	
NAME STREET ADDRESS		-	C	NAME - STREET ADDRESS		- Apple - Apple -			-	
CITY-ST-ZIP	1			CITY-ST-ZIP						
TITLE	<u> </u>		☐ Delete	TITLE			-	Change	Addition]
NAME				NAME						
STREET ADDRESS	ĺ			STREET ADDRESS						
CITY-ST-ZIP	-		<u> </u>	CITY-ST-ZIP				Change	Addition	1
TITLE NAME			Delete	TITLE NAME						
STREET ADDRESS				STREET ADDRESS						
CITY-S1-ZIP				CITY-ST-ZIP		<u> </u>				1
TITLE			☐ Delete	TITLE			_	☐ Change	☐ Addition	}
NAME				NAME						
STREET ADDRESS CITY-ST-ZIP				STREET ADDRESS CITY-ST-ZIP						
	portificable at the	information pupulisal colle	this filing does not qualify.		ed in Section	119.07(3)(i), Florida Statutes. I i	urther certif	v that the i	nformation	1
indicator	d on this range	t or cumplemental report is	s true and accurate and the	at my signature shall h:	ave the same	Hegal effect as it made under oa	ain: inai i an	ı an omcer	or airector	}
of the col changed	rporation of th d, or on an atta	receiver or trustee empo chment with an address,	owered to execute this repo with all other like empower	ort as required by Cha ed.	pter 607, 7101	rida Statutes; and that my name	appears in	DIOUR II O	1 DIOCK 12 H	ľ
	ΓURE: └-	XXIIX	President	IW ,H YAT)	ALMEO!	1/03/01	(720	563-	00~	

AURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

1/03/01

(721)563-9902 Daytime Phone #