

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **V29340** (9)

1. Corporation Name:
AMERICAN MORTGAGE EXPRESS, INC.



Principal Place of Business: **5901 N.W. 151 STREET SUITE 102 MIAMI LAKES FL 33014**
Mailing Address: **5901 N.W. 151 STREET SUITE 102 MIAMI LAKES FL 33014**

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

3. Date Incorporated or Qualified: **04/17/1992**
3a. Date of Last Report: **09/29/1995**
4. FEI Number: **65-0327171**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

g. Name and Address of Current Registered Agent: **BURNSIDE, ESTELLE 5901 NW 151 STREET SUITE 120 MIAMI LAKES FL 33014**
10. Name and Address of New Registered Agent (81-85) fields: Name, Street Address, City, State (FL), Zip Code.

11. Pursuant to the provisions of Sections 607.0507 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 607.0507, Florida Statutes.

SIGNATURE: _____ DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD	WEITZER, HARRY	1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 5901 NW 151 STREET #120	MIAMI LAKES FL 33014	2. NAME	
CITY-STATE-ZIP: MIAMI LAKES FL 33014		13. STREET ADDRESS	
TITLE: VP	ESTELLE BRUNSIDE	14. CITY-STATE-ZIP	
NAME: ESTELLE BRUNSIDE	5901 NW 151 STREET #120	2. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 5901 NW 151 STREET #120	MIAMI LAKES FL 33014	22. NAME	
CITY-STATE-ZIP: MIAMI LAKES FL 33014		23. STREET ADDRESS	
TITLE: VPS	COREN, GEORGE J.	24. CITY-STATE-ZIP	
NAME: COREN, GEORGE J.	5901 NW 151 STREET #120	3. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 5901 NW 151 STREET #120	MIAMI LAKES FL 33014	32. NAME	
CITY-STATE-ZIP: MIAMI LAKES FL 33014		33. STREET ADDRESS	
TITLE: CFO	GINSBURG, RICHARD M.	34. CITY-STATE-ZIP	
NAME: GINSBURG, RICHARD M.	5901 NW 151 STREET #120	4. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 5901 NW 151 STREET #120	MIAMI LAKES FL 33014	42. NAME	
CITY-STATE-ZIP: MIAMI LAKES FL 33014		43. STREET ADDRESS	
TITLE: VP	MELLADO, ARAHUM	44. CITY-STATE-ZIP	
NAME: MELLADO, ARAHUM	5901 NW 151 STREET #120	5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 5901 NW 151 STREET #120	MIAMI LAKES FL 33014	52. NAME	
CITY-STATE-ZIP: MIAMI LAKES FL 33014		53. STREET ADDRESS	
TITLE:		54. CITY-STATE-ZIP	
NAME:		6. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS:		62. NAME	
CITY-STATE-ZIP:		64. STREET ADDRESS	
		64. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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 oath. 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 as an attachment with an address.

SIGNATURE: _____ DATE: **3/22/96** (305) 819-4663
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)