2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000002714

1. Entity Name

SIGNATURE

PROVIDIAN I	BANCOHP SERVICE	25, INC	•	•	
Principal Place of Business			Mailing Address		
PROVIDIAN BANCORPServices , Inc. 201 MISSION STREET. 28TH FLOOR SAN FRANCISCO CA 94105			PROVIDIAN BANCORPServices , Inc 201 MISSION STREET. 28TH FLOOR SAN FRANCISCO CA 94105-1831		
2. Principal Place of	of Business		3. Mailing Address	3	_
Suite, Apt. #, etc.			Suite, Apt. #, etc).	-
City & State			City & State		
Zip	Country		Zip	Country	_
6.	Name and Address of C	 urrent Re	egistered Agent	ł	_

FILED Apr 18, 2000 8:00 am Secretary of State

04-18-2000 90251 024 ***150.00

THE COME FOR

DATE



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Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE			
City & State		City & State	· · · · · · · · · · · · · · · · · · ·	4. FEI Number 94-3055127 Applied For Not Applicable			
Zip	Country	Zip	Country	5. Certificate of Status Desired			
6. Name and Address of Current Registered Agent			<u> </u>	7. Name and Address of New Registered Agent			
			Name				
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			Street Addr	Street Address (P.O. Box Number is Not Acceptable)			
			City	FL Zip Code			

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

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

FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be

OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. President, CEO & Chairman of Achange KRX ☐ Addition TITLE ☐ Delete the Board MEHTA, SHAILESH J NAME STREET ADDRESS STREET ADDRESS 201 MISSION ST 28TH FL CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA 94105 President, Emerging Businesses Mange Seth A. Barad ☐ Detete TITLE TITLE BARAD, SETH A NAME NAME 201 Mission St., 28th Floor STREET ADDRESS STREET ADDRESS 94105 San Francisco, CA 94105 CITY-ST-7IP CITY-ST-ZIP SAN FRANCISCO CA President, Credit Cards **EXE**X ☐ Delete TITLE TX Change Addition TITLE NAME ALVAREZ, DAVID NAME STREET ADDRESS 201 MISSION ST 28TH PL. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA 94105 T Change X Addition S X Delete TITLE TITLE Secretary **GLAVELQUX:\RONALD:** NAME NAME Mary Ellen Richey STREET ADDRESS 201 MISSION ST 28TH FL STREET ADDRESS 201 Mission St., 28th Floor CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA 94105 <u>San Francisco, CA 94105</u> XXX Addition Delete ☐ Change TITLE TITLE Chief Financial Officer **ENXOTAX XAMES**XIX NAME NAME David J. Petrini STREET ADDRESS STREET ADDRESS 201 MISSION ST 28TH FL 201 Mission St., San Francisco, CA 94105 CITY-ST-ZIP CITY-ST-7IP SAN FRANCISCO CA 94105 Assistant Secretary X Addition ☐ Change TITLE 54154 ☐ Delete TITI F NAME Sylvia Yau NAME STREET ADDRESS STREET ADDRESS 201 Mission Street CITY-ST-ZIP CITY-ST-ZIP San Francisco, CA 94105

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STATURE AND TYPED OF PRINTED NAME OF SIGNATURE AND TYPED OF PRINTED NAME OF SIGNATURE OF DIRECTOR

4/11/00

(415) 543-0404

Daytime Phone #