


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2004 08:00 AM
Secretary of State

DOCUMENT # G841110
 1. Entity Name
 EQUI-DEBT FINANCIAL GROUP, INC.



Principal Place of Business C/O MARK SHANTZIS 8885 SOUTH HWY A1A MIAMI BEACH, FL 32951 US	Mailing Address C/O MARK SHANTZIS 8885 SOUTH HWY A1A MIAMI BEACH, FL 32951 US
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07032004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2445235	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 SHANTZIS MARK D
 8885 SOUTH HWY A1A
 MELBOURNE BEACH, FL 32951

DO NOT WRITE IN THIS SPACE

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. I am familiar with, and accept the obligations of registered agent

SIGNATURE _____ DATE _____
(Signature typed or printed name of registered agent; and file if applicable) (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SHANTZIS, MARK D. 8885 SOUTH HWY A1A MELBOURNE BEACH, FL 32951
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHANTZIS, GABRIEL 2500 E HALLANDALE BCH BL HALLANDALE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST SHANTZIS, MORA 8885 SOUTH HWY A1A MELBOURNE BEACH, FL 32951
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mark D. Shantzis* Date: 6/30/04 Daytime Phone # 321-733-6123
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR