

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

**PROFIT CORPORATION ANNUAL REPORT 1996**



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

**DOCUMENT # P94000032998 (4)**

1. Corporation Name  
**MERCHANT FINANCE CORPORATION**



Principal Place of Business: **821 EAST BROWARD BLVD. FORT LAUDERDALE FL 33301**  
Mailing Address: **821 EAST BROWARD BLVD. FORT LAUDERDALE FL 33301**

2. Principal Place of Business: 21 State, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country; 25  
2a. Mailing Address: 26 State, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country; 30

3. Date Incorporated or Qualified: **05/02/1994** 3a. Date of Last Report: **04/20/1995**  
4. FEI Number: **65-0492229** Applied For:  Not Applicable  
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  
10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent: **MINACI, DOMINICK F 821 EAST BROWARD BLVD. FORT LAUDERDALE FL 33001**

81 Name; 82 Street Address (P.O. Box Number is Not Acceptable); 83; 84 City; 85 Zip Code: **FL**

11. Pursuant to the provisions of Sections 607.0512 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 607.0525, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
		<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<b>D</b>	1. TITLE	
NAME	<b>VASSILOPOULOS, TONY</b>	2. NAME	
STREET ADDRESS	<b>821 EAST BROWARD BLVD.</b>	3. STREET ADDRESS	
CITY, ST, ZIP	<b>FORT LAUDERDALE FL 33301</b>	4. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		5. TITLE	
NAME		6. NAME	
STREET ADDRESS		7. STREET ADDRESS	
CITY, ST, ZIP		8. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		9. TITLE	
NAME		10. NAME	
STREET ADDRESS		11. STREET ADDRESS	
CITY, ST, ZIP		12. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		13. TITLE	
NAME		14. NAME	
STREET ADDRESS		15. STREET ADDRESS	
CITY, ST, ZIP		16. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		17. TITLE	
NAME		18. NAME	
STREET ADDRESS		19. STREET ADDRESS	
CITY, ST, ZIP		20. CITY, ST, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this report is true and correct, and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information in respect of this annual report is true and correct, 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 appointed to manage the corporation as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed from a prior report.

SIGNATURE: **TONY VASSILOPOULOS** 03/22/96  
954-463-8200

CR2E034 (12/95)