

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 07, 2000 8:00 am**  
**Secretary of State**

05-07-2000 90007 028 \*\*\*150.00

**DOCUMENT # P95000090782**  
 1. Entity Name  
**EQUITY BUILDERS GROUP, INC.**

Principal Place of Business      Mailing Address  
 4260 SE 20TH PLACE #703      4260 SE 20TH PLACE #703  
 CAPE CORAL FL 33904      CAPE CORAL FL 33904-5432



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
**139 EXECUTIVE CIRCLE**      **PO BOX 291964**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**201**  
 City & State      City & State  
**DAYTONA BEACH, FL**      **PORT ORANGE, FL**  
 Zip      Country      Zip      Country  
**32114**      **USA**      **32129-1964**      **USA**

4. FEI Number      Applied For  
**65-0635539**      Not Applicable  
 5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**HAMMER, RICHARD**  
**4260 SE 20TH PLACE #703**  
**CAPE CORAL FL 33904**

7. Name and Address of New Registered Agent  
 Name **RAYMOND TAYLOR**  
 Street Address (P.O. Box Number is Not Acceptable)  
**139 EXECUTIVE CIRCLE**  
**# 201**  
 City **DAYTONA BEACH**      **FL**      Zip Code **32114**

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.  
 SIGNATURE *Raymond J. Taylor*      DATE **4/25/00**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

**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 Added to Fees**

11. OFFICERS AND DIRECTORS	
TITLE <b>DPST</b>	<input checked="" type="checkbox"/> Delete
NAME <b>HAMMER, RICHARD</b>	
STREET ADDRESS <b>4260 SE 20TH PLACE #703</b>	
CITY-ST-ZIP <b>CAPE CORAL FL 33904</b>	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE <b>DP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>RAYMOND TAYLOR</b>	
STREET ADDRESS <b>139 EXECUTIVE CIRCLE # 201</b>	
CITY-ST-ZIP <b>DAYTONA BEACH, FL 32114</b>	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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.

SIGNATURE: *Raymond J. Taylor*      DATE **4/25/00**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Daytime Phone #