## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # **P96000089490** Aug 16, 2000 8:00 am Secretary of State APPROVED EQUITY FUNDING CORP. 08-16-2000 90002 023 \*\*\*150.00 Principal Place of Business Mailing Address 12936 N. A1A 12936 N. A1A VERO BEACH FL 32963 VERO BEACH FL 32963 2. Principal Place of Business 3. Mailing Address 2936 N. AIA 12936 N Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For City & State 65-0705236 BEAC ero Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired ひらむ Fee Required Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BIAMONTE, JOSEPH II Street Address (P.O. Number is Not Acceptable) 12936 N. A1A VERO BEACH FL 32963 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered gered agent, or both, in the State of Florida SIGNATURE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. Change ☐ Addition ☐ Delete BIAMONTE, JOSEPH II 12936 N. A1A STREET ADDRESS CITY-ST-ZIP VERO BEACH FL 32963 ☐ Defete TITLE ☐ Change ☐ Addition NAME

11. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITL F ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNAPORE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph BLAMONTE II

8/1/00 5632

To- The Department of State on whom it may concern Please waire late fee. I did not sieve the original first notice. This is in several year this hoppened, D'm 10my, any questions plane call me. Joseph P. BIAMONTE II Puscelut Approved Equity Funding GORD.

FEI # 65-0705236

Jong of Market DI I called your dept. today and They ask me to send \$150, and this letter. Though you again'

That you