

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H75597

**FILED**  
**Jan 09, 2013**  
**Secretary of State**  
**CC7477434197**

**Entity Name:** E.T.I. FINANCIAL CORPORATION

**Current Principal Place of Business:**

2825 N. UNIVERSITY DRIVE  
SUITE 300  
CORAL SPRINGS,, FL 33065

**Current Mailing Address:**

2825 N. UNIVERSITY DRIVE  
SUITE 300  
CORAL SPRINGS,, FL 33065

**FEI Number:** 59-2611508

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FINKELSTEIN, MYRON PRES.  
2825 N. UNIVERSITY DRIVE  
SUITE 300  
CORAL SPRINGS, FL 33065 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title T  
Name SHAW, KAREN F  
Address 2825 N. UNIVERSITY DRIVE  
City-State-Zip: CORAL SPRINGS FL 33065

Title PD  
Name FINKELSTEIN, MYRON  
Address 2825 N. UNIVERSITY DRIVE  
City-State-Zip: CORAL SPRINGS FL 33065

Title SVD  
Name RAYMOND, DAVID  
Address 2825 N. UNIVERSITY DRIVE  
City-State-Zip: CORAL SPRINGS FL 33065

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** KAREN SHAW

**CFO**

**01/09/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date