

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H75597

Entity Name: E.T.I. FINANCIAL CORPORATION**Current Principal Place of Business:**1551 SAWGRASS CORPORATE PKWY STE 130
SUNRISE, FL 33323**Current Mailing Address:**1551 SAWGRASS CORPORATE PKWY STE 130
SUNRISE, FL 33323**FEI Number:** 59-2611508**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RAICOVICH, MONIQUE
1551 SAWGRASS CORPORATE PKWY STE 130
SUNRISE, FL 33323 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 VP
Name RAICOVICH, MONIQUE
Address 1551 SAWGRASS CORPORATE
PARKWAY
SUITE 130
City-State-Zip: SUNRISE FL 33323

Title DIRECTOR
Name MARCUS, JAMES
Address 1551 SAWGRASS CORPORATE
PARKWAY
SUITE 130
City-State-Zip: SUNRISE FL 33323

Title COO
Name PEREZ, TONY
Address 1551 SAWGRASS CORPORATE PKWY
STE 130
City-State-Zip: SUNRISE FL 33323

Title DIRECTOR, PRESIDENT
Name CAMBI, JOSEPH
Address 1551 SAWGRASS COPRORATE
PARKWAY
SUITE 130
City-State-Zip: SUNRISE FL 33323

Title SECRETARY/TREASURER
Name SAMMATARO, DEBORAH
Address 1551 SAWGRASS CORPORATE
PARKWAY
SUITE 130
City-State-Zip: SUNRISE FL 33323

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: JOSEPH CAMBI**PRESIDENT****01/08/2021**

Electronic Signature of Signing Officer/Director Detail

Date